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CITY OF LIVERPOOL.



EDUCATION COMMITTEE.

REPORT

ON THE WORK OF THE

SCHOOL MEDICAL SERVICE

FOR THE YEAR

1929

BY

A. A. MUSSEN, B.A., M.D., D.P.H.,

Medical Officer of Health, and Medical Officer to the Education Authority.

Received by the Education Committee, 23rd June, 1930.

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EXPLANATION OF TECHNICAL TERMS USED IN THIS REPORT.

Attic cavity.....	A small compartment inside the ear.
Auditory canal	The canal leading from the external opening of the ear.
Blepharitis	Inflammation of the margins of the eyelids.
Caries	Decay of bone or teeth.
Cholesteatomata.....	Hard, bony, pearl-like bodies deposited in diseased ears.
Conjunctivitis.....	Inflammation of the transparent membrane lining the front of the eye and the inner surface of the eyelids.
Corneal ulcers	Ulcers on the cornea or clear part in front of the eye.
Diastolisation	A new method of treatment for nasal catarrh.
Electrolytic medication	See Zinc ionisation and Zinc electrolysis.
Encephalitis lethargica	Sleepy sickness.
Granulations	Proud flesh.
Hypertrophy	Overgrowth.
Impetigo	Contagious sores with yellow crusts on, often associated with dirty and verminous conditions.
Keratitis	Inflammation of the cornea.
Lymphatic tissues ...	Gland tissues which act as a body defence against bacterial infections.
Mastoiditis	Inflammation of the mastoid bone which lies immediately behind the ear, and communicates internally with it.
Meatus	The external opening of the ear.
Mucous membrane ...	A moist membrane, as for example, on the inside of the nose and mouth.
Myopia	Short sight.
Naso-pharynx	The space at the back of the nose and throat.
Optic atrophy	Degeneration of the nerve of the eye.
Otitis media	Inflammation of the inside of the ear.
Otorrhœa	A discharge from the ear (running ear).
Pediculosis	Infection with lice.
Polypi	Growths hanging by a stalk.
Rhinitis	Inflammation of the mucous membrane of the nose.
Scabies	A contagious skin condition commonly known as "itch."
Stenosis	A narrowing.
Suppuration	Inflammation resulting in the formation of pus.
Trachoma	A chronic contagious disease of the eye.
Tympanum	Drum of the ear.
Tympanic sepsis	Pus formation inside the ear.
Zinc ionisation	A method of treating disease of the ear by means of a zinc solution applied electrically.
Zinc electrolysis.....	An electrical method of destroying abnormal tissues.

CITY OF LIVERPOOL.

EDUCATION COMMITTEE.

REPORT of the MEDICAL OFFICER to the Education Authority for the Year ended 31st December, 1929.

The Medical Officer begs to submit his Report on the School **Introduction.**
Medical Service for the year 1929.

1. During the year an additional School Medical Officer (Dr. Atkinson) and an extra dentist (Mr. Brewer) were appointed, these appointments bringing the professional establishment up to 14 Medical Officers and 6 Dental Officers.

Dr. Gubbins, Dr. Woodeson and Dr. Muir, resigned during the year, and they were replaced by Dr. McLoughlin, Dr. Wilson and Dr. Bradley, the last named not commencing duty until January, 1930.

2. The Committee had under consideration during the year the provision of additional school clinics for the treatment of minor ailments, defective vision and dental defects, and it is hoped that at an early date the new clinics at Norris Green, Clifton Street, Garston, and at Everton Road will all be opened.

3. It is gratifying to report that of recent years a considerable advance has been made towards the full development of the School Medical Service, and, with the opening during the forthcoming year of two Day Open Air Schools and the Orthopædic and other Clinics, the only remaining outstanding requirement is for the extension of the dental scheme to make this highly valuable preventive measure available to larger numbers of the school children.

4. The Garston District Nursing Association which ever since the opening of the Minor Ailments Clinic in that area had provided the nursing assistance for the Clinic, owing to the pressure of other work found themselves unable to continue to supply the nurses, and from November 1st the nursing assistance has been supplied by the staff of Health Visitors.

5. For some two years the Department has been collecting information as circumstances have permitted with regard to the question of rheumatism amongst children, and at the present time 1,000 cases have been investigated, and it is hoped that the information collected, which will require a good deal of careful analysis, will be of some use in furthering our knowledge into the causation and incidence of this serious and crippling condition.

6. During the year the following five new schools were opened, viz., Wellesbourne Road, Corinthian Avenue, Heath Road, Formosa Drive and Bective Street Council Schools, and one school was closed, namely, Hope Street Council School. There were at the end of the year 184 public elementary schools.

The average number of children on the rolls for the year was 135,484, and the average attendance 119,902, or 88·5 per cent.

7. The complete statistical Tables of the work carried out during the year appear in Appendix A and Appendix B of the Report on page 68, but the following, however, is a short summary of the inspections and treatment carried out under the Committee's schemes.

8. The School Medical Officers have during the year carried out at the schools and Inspection Clinics 117,078 examinations relating to approximately 75,000 school children.

Public Elementary Schools.

Routine examinations	...	...	...	...	42,417
Special examinations	...	...	...	...	11,526
Re-inspections	...	...	...	...	48,284
Total number of inspections	...	...	...	...	102,227
Number of individual children inspected	...	...	...	...	74,600

Higher Schools.

Routine examinations	...	...	...	...	6,286
Special examinations	...	...	...	...	444
Re-inspections	...	...	...	...	6,429
Total number of inspections	...	...	...	...	13,159
Number of individual children inspected	...	...	...	...	7,491

Special Schools.

Routine examinations	...	...	...	...	473
Special examinations	...	...	...	...	39
Re-inspections	...	...	...	...	1,180
Total number of inspections	...	...	...	...	1,692

Summary of Cases treated under the Committee's Schemes.

Dental caries	...	...	...	...	16,270
Miscellaneous minor ailments	...	...	...	...	13,160
Defective vision	...	...	...	...	5,846
Skin diseases	...	...	...	...	4,755
Eye diseases	...	...	...	...	2,898
Ear diseases	...	...	...	...	1,960
Tonsils and Adenoids	...	...	...	...	1,363

In addition to the above, 15,539 children attended the various Cleansing Stations for treatment.

The Medical Officer is indebted to the Director of Education for information which he has kindly supplied with regard to certain sections of this report relating in particular to the work in connection with the Special Schools, Provision of Meals, and Juvenile Employment; and also to the Land Steward and Surveyor for certain information supplied in connection with school premises.

ORTHOPÆDIC SCHEME.

9. At the end of 1925, the Committee arranged for an Orthopædic Surgeon to examine and report upon a considerable number of cases of crippling amongst school children, with a view to providing information to guide them as to deciding whether or

not there was need for the inauguration of an Orthopædic Scheme. The Surgeon, in concluding his report, recommended that there was undoubtedly need for earlier ascertainment and treatment of Orthopædic cases, that a following-up scheme in order to secure more regular and continuous treatment was also advisable, and that Orthopædic clinics should be provided to which should be attached a part-time Orthopædic Surgeon and an Orthopædic Nurse.

10. The Committee, after careful consideration, decided that a case had been made out for the establishment of an Orthopædic Scheme, and in view of the fact that the majority of the cases dated their onset from pre-school life, they decided to ask the Health Committee to co-operate in the work, and the Health Committee agreed to this proposal. Owing to financial stringency, however, the putting into force of the scheme was temporarily deferred. During 1929, the Committees concerned decided to make a commencement with the scheme, and the sanction of the Board of Education was obtained.

11. The Committee were desirous that the scheme should in no way compete with the Hospitals, but rather that it should supplement the work of the Hospitals by relieving them of some of the over-pressure, particularly in the Orthopædic and Massage Departments. No provision, however, was at the outset made in the scheme for in-patient treatment in view of the fact that there were already a considerable number of beds set aside for such cases in the large General Hospitals, and furthermore, that as under the Local Government Act, 1929, the Poor Law Hospital for Children at Alder Hey, with its 150 Orthopædic beds, would in due course be transferred to the City Council, it was hoped that some of these beds might be set aside for children under the scheme requiring in-patient treatment.

12. Liverpool, of recent years, has considerably extended its boundaries, with the result that its main Hospitals are no longer easily accessible to a large proportion of the inhabitants, without a considerable time being spent in travelling.

Owing to this and other difficulties with which the parents of crippled children have to contend in order to keep up regular and frequent attendance at the Hospital Out Patient Departments, the Committee considered that they could best assist by bringing the facilities for treatment nearer to the homes of the cases, by providing Orthopædic Clinics in different areas of the City.

The provision of such Clinics will be economically carried out by the utilisation of premises already in the possession of the Committees concerned, and the first two Clinics, which will be opened early in 1930 will be held, one on the premises of an Infant Welfare Clinic in the Dingle, and the other in some classrooms in the former Walton Road Day Industrial School.

13. Mr. McMurray, one of the Senior Orthopædic Surgeons of the City, who is on the staff of three of the Liverpool Hospitals, was appointed as Consulting Orthopædic Surgeon, and Mr. McFarland, who is on the staff of two of these Hospitals, was appointed as Surgeon-in-charge of the Orthopædic Clinics.

DEFECTIVE VISION.

14. The routine testing of the vision is not carried out in the case of the entrants, but 735 were found to have defective vision, attention having been drawn to the defect in 84 per cent. of these cases by the presence of squint.

The number of children with defective vision, including squint, found at the routine examinations of the intermediates and leavers was 5,198 (19·4 per cent.), but 52 per cent. of these cases were already under observation for the defect, the majority having been supplied with glasses.

In addition to the routine cases, 4,453 were seen as special cases, and of this number 3,172 (71·2 per cent.) were already known to the department.

The number of new cases treated under the Committee's scheme was 3,228, as compared with 3,211 in 1928, 3,111 in 1927, and

2,674 in 1926, whilst 163 children were treated privately or at the Hospitals. The number re-examined at the Clinics was 2,359.

Glasses not worn.

15. At the re-inspections in the schools, 12,288 children, who had been provided with glasses, were seen, and of these 4,008, or 32·6 per cent., were found not to be wearing them, which is a slight improvement in the percentage recorded in the previous year.

16. Dr. Livsey, the Committee's Oculist, reports that during the past year the three Defective Vision Clinics at Blackstock Street, Old Swan and Garston have continued their valuable work smoothly and efficiently. The old attitude of prejudice and opposition is only occasionally met with, and co-operation with the expression of gratitude for the care and attention given is becoming more frequent than formerly. The installation of a revolving box test-type at the Blackstock Street Clinic is a recent improvement.

The daily attendance of the Optician for the purpose of measuring the children for their frames is much appreciated by the parents. As far as possible, it is arranged that the glasses are given out after school hours.

17. On re-examination, many children are still found not to be wearing their glasses. A frequent reason given, especially in some schools, is fear of ridicule from their fellow-scholars. This ridicule might perhaps partly be minimised by occasional talks on the part of the teachers. In other cases, glasses are not worn because there is not immediately a marked improvement of vision with them. This may be so in some cases, as the development of normal visual acuity is sometimes retarded, but in such cases a little simple explanation at the Clinic often stimulates them to wear their glasses, more especially in the case of the older children.

Such simple explanations are helpful to both parents and children, for their co-operation is more likely if there is an intelligent understanding of the instructions given. These talks

take time, but they are always appreciated, and the anxieties and doubts of parents are often allayed in consequence.

18. Especially in the case of myopes, an effort is made to arrange a final examination just before leaving school, so that the children may be provided with the best possible visual equipment before commencing work. The parents much appreciate this consideration, and often express regret that the care of the Education Authority can no longer be looked for. Advice is given in special cases as to suitable occupations, and in all, suggestions are made as to the care of their sight after leaving school.

19. There have been no cases of trachoma attending the Eye Clinics, and cases of severe corneal ulceration have been few. The beneficial effect of the Minor Ailments Clinics in the treatment of those lid conditions which predispose to severe and recurrent corneal inflammation and ulceration is increasingly evident every year. In the early days of the Eye Clinics there were always several of these severe and distressing cases under treatment: they are now comparatively rare and of milder degree. By this skilled treatment much pain and discomfort have been avoided, serious and permanent damage to sight has been prevented and the loss of much valuable time at school saved.

20. Under the Health Committee's scheme for the treatment of **Pre-School Children.** squint in pre-school children, 48 cases were treated during the year. This scheme would be more fully utilised were it better known, as many cases are still being found in which parents wait until the children attend school when the squint is confirmed and incurable, and sight has been lost beyond recall, to the real distress of the parents.

The early treatment of such cases is most important if the inevitable loss of sight in the squinting eye from delay in the provision of spectacles is to be prevented. The attitude of parents to glasses in such young children is much more reasonable than formerly.

Hereditary Optic Atrophy (Leber's Disease).

21. Hereditary Optic Atrophy is a very rare disease, affecting the optic nerve and the light-sensitive layer at the back of the eye, known as the retina, the disease being rapidly progressive in nature and culminating in almost complete blindness.

22. Although the defect is well-known to be hereditary, no precise information has hitherto been obtained with regard to the manner in which it is transmitted. The disease was first described by Leber some 60 years ago, who stated that the period of onset was usually between the ages of 18 and 23, though subsequently other cases were found which had commenced both earlier and later than was mentioned by Leber. It was also thought that the disease was a sex limited one, similar to hæmophilia (excessive bleeding), i.e., one which manifests itself in the male members of the family, the females being apparently unaffected; all the children, however, of the affected males are normal, whereas the sons of the apparently normal females become affected.

23. It has been the practice since the inception of the Education Committee's scheme for the treatment of Defective Vision about 20 years ago to keep in the Medical Department all the medical records made by the Oculists concerning the cases treated by them, and these records have shewn that there have constantly been some cases of this disease occurring amongst the school children. In view of the fact that the disease is extremely rare, it was thought that a detailed investigation into the individual cases and their family histories might throw further light on the causation or method of transmission, especially as it was already known that some of the children affected were related.

The investigation, which was carried out by certain of the School Medical Staff, has brought to light the very interesting facts that not only were all the cases related, but that they could be traced back through several generations to one common ancestor who was definitely known to be blind, presumably from this disease. Although the pedigree could not be traced further back

PEDIGREE OF HEREDITARY OPTIC ATROPHY

(LEBER'S DISEASE.)

Generation.

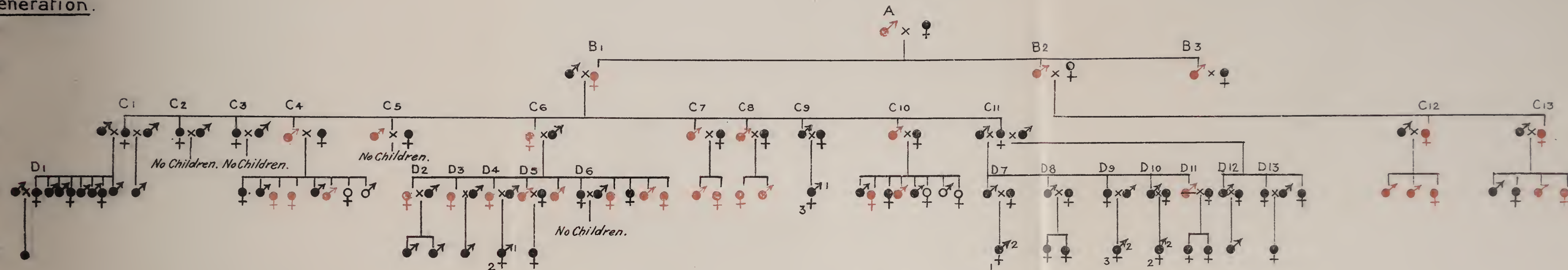
A

B

C

D

E



♂ = Normal Male.

♂ = Affected Male.

♂ or ♀ = Suspected case

♀ = Normal Female.

♀ = Affected Female.

♂²₁ = 2 Male unaffected children
and 1 Female — child

D 11

♂

= Blindness not due to this disease.

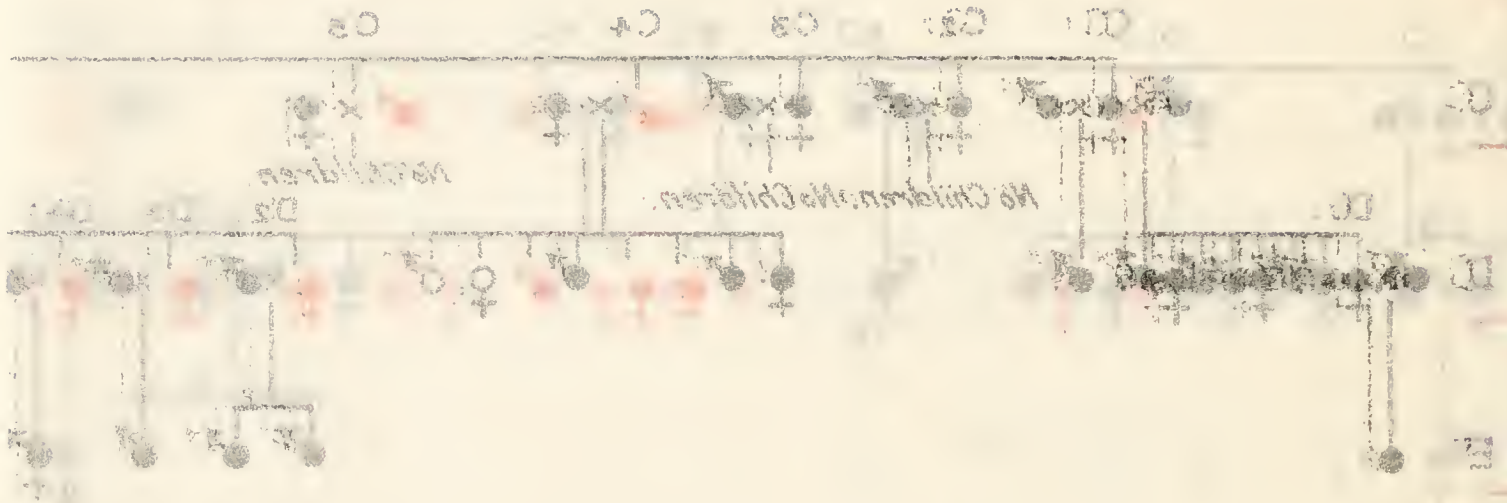
TABLE OF HEREDITARY OPTIC ATROPHY

(Leber's Disease)

Generation

IV

III



Legend:

- = Affected Male
- = Affected Female
- ⊗ = Deceased Male
- ⊙ = Deceased Female
- ⊕ = Unaffected Male
- ⊖ = Unaffected Female
- ⊗ = Deceased Male
- ⊙ = Deceased Female
- ⊕ = Unaffected Male
- ⊖ = Unaffected Female

than this particular ancestor, it was reported that some of his relatives also were blind.

24. From the information which has been collected the accompanying family tree has been constructed.

Perhaps the most important facts that have been elicited by this research are, firstly, that the disease is not, as was formerly thought, a sex limited defect in which females do not exhibit the disease but are capable of transmitting it, and, secondly, that it is transmitted according to the Mendelian laws of Heredity appertaining to the transmission of Dominant and Recessive Characteristics.

25. For those unfamiliar with Mendelism, a brief reference to Mendel's original experiments may be of assistance in understanding how this defect is transmitted. Mendel crossed a perfectly pure tall sweet pea with a dwarf sweet pea, and found that the plants produced were all of the tall variety, and not, as might have been expected, intermediate in size. Mendel regarded this phenomenon as due to the fact that the germ cells of the tall plant contained a certain factor for tallness, which factor was not present in the dwarf pea, and when they were crossed this factor was dominant, and consequently all the plants produced were of the tall variety. These tall offspring, however, were found to be hybrid in nature, for when they were crossed with one another it was found that some of the next generation reverted to the dwarf variety. If, on the other hand, one of these hybrids was crossed with a dwarf pea, the resulting young plants were found to be of the tall hybrid variety and the dwarf variety in equal numbers,

Mendel's experiments shew that in the case of the foregoing characteristics, the proportion of the tall and dwarf varieties could be definitely forecasted, provided that the numbers involved were sufficiently large. Mendel's work has been carried on by others, who have found that his principles apply in other instances, e.g., the colouring of animals, and the transmission of certain diseases or abnormalities in the human race, etc.

26. It is a well-known fact that the laws of chance work with unfailing accuracy provided that the numbers dealt with are sufficiently large, e.g., if a coin be spun 1,000,000 times, heads should turn up approximately 500,000 times and tails the same number, but if a coin be spun, say, only four times, it might easily fall tails or heads up three times out of the four, the number of spins being insufficient to bring about the certain even distribution of heads and tails.

Similarly, in the study of human pedigrees the number of children in respective families being comparatively small, the dominant and recessive factors cannot be expected, in every instance, to come out exactly in the predicted ratio. When the attached pedigree of families affected with Hereditary Optic Atrophy is studied as a whole it will be clear that, although the theoretically anticipated proportion of children suffering from the disease has not manifested itself in the case of every family, the disease is undoubtedly transmitted on Mendelian lines, the Hereditary Optic Atrophy appearing as a dominant factor. When a member of the family possessing this dominant factor marries a normal individual (i.e., a recessive, or one not carrying the dominant factor) the children should be either free from the disease (recessive) or develop it (dominant) in approximately equal proportions. In the case of those born free from the disease (recessive) they are not capable of transmitting the defect, and the disease becomes absolutely eradicated in their descendants.

27. On studying the pedigree in detail, it will be noticed that Mr. A., the great great grandfather of the latest generation of the family, was blind, and it was reported that some of his ancestors were also blind. All trace of the descendants of B3 has been lost, though relatives report that some of his children were blind. Mr. B2 had two blind daughters, C12 and C13, the former having three children who were blind, whilst the latter (C13) had four children, two of whom were blind and two normal, which is the the exact anticipated Mendelian ratio.

To revert to Miss B1, she married and had eleven children, six of whom manifested the disease and five were normal, again the anticipated Mendelian ratio. Her five normal children all married and had in all forty children and grandchildren. These, according to Mendel's law, should all have been normal so far as this disease was concerned, but, after construction of the pedigree, it was distinctly disconcerting to find that one of the sons of Miss C11 was blind, a fact that seemed at first to discredit the theory of transmission on Mendelian lines. It was, therefore, considered essential to ascertain precisely the cause of this man's blindness, and the investigation elicited the fact that the blindness was not due to this disease at all, but to an altogether different condition, viz., high myopia complicated by astigmatism, which only began to develop serious symptoms after he attained manhood.

Of the first six children of Mr. C4, three have inherited the disease and three are normal, whilst the two youngest children, who are still infants, are suspected of having the disease, but the parents have not as yet permitted their examination by an Oculist.

Miss C6 married and has ten children, eight of whom were affected. She has seven grandchildren, but most of these are too young yet to have manifested the disease. Mr. C7 and Mr. C8 each have two children, all of these being affected. Of Mr. C10's first five children, two are affected and three are, up to the present, normal, but whilst circumstances have not yet permitted the examination of the youngest three, the mother is apprehensive about their sight.

It will be noted that the number of cases suffering from this disease shows a progressive increase with each succeeding generation; starting with one case in generation A, there were 3 in generation B, 8 in generation C, and 22 in generation D. The present members of generation E, who, according to Mendelian principles may develop the disease, are all too young at present to show any symptoms.

Of the 33 descendants of Mr. A who developed the disease, 17 were males and 16 females, 28 of these descendants being alive at the present time. Of the affected males who married, 14 out of their 19 children developed the disease, whilst 19 out of the 38 children of the affected females developed it. Of the cases about which the most detailed information has been obtained, all have developed the first symptoms in childhood, some before reaching school age.

28. The results of the investigation of this series of cases and their family connections may be briefly summarised as follows:—

(1) The disease is transmitted according to Mendelian laws of heredity appertaining to dominant and recessive characteristics, and is attributable to a dominant factor. Consequently, in the event of the marriage of any affected case with a normal individual, it is possible to predict that approximately half the offspring will also develop the disease. Further, in the case of unaffected members, it is quite safe for them to marry, as the disease will not be transmitted to their descendants.

(2) The disease is not sex limited as was formerly thought, both males and females suffering from and transmitting the disease in approximately equal proportions.

(3) So far as the cases in which it has been possible to make a personal investigation are concerned, the disease has manifested itself in childhood, and the onset is not delayed until adult life, as was thought by Leber.

29. Whilst progressive health measures have, of recent years, contributed enormously towards the preventing of crippling due to many disabling conditions, there is, unfortunately, only one means of preventing hereditary diseases which have such disastrous and far-reaching effects, as Hereditary Optic Atrophy, and that is the abstention from marriage of the affected members.

NUTRITION.

30. Certain general factors contributing towards the general improvement in nutrition of the school children have been discussed in previous Annual Reports, and last year reference was made to the fact that in several of the schools the teachers had made arrangements by which parents could obtain at cost price milk or malted milk for their children during the morning sessions at the schools.

In 1929 these arrangements were considerably extended, and investigation in December shewed that in 242 Departments of the Public Elementary Schools over 11,000 children were being supplied with fresh milk, and over 13,000 with malted milk, a total of approximately 25,000. In the case of the fresh milk, one-third of a pint is given daily, usually at a charge of 5d. per week, whilst the average charge for the malted milk is approximately 2 $\frac{3}{4}$ d. per week.

The children benefiting under this scheme are those whose parents are able to afford the weekly sums charged for the milk, though in many of the Departments concerned the teachers have also given milk free to certain necessitous cases. Several of the teachers have expressed the opinion that this supplementary meal has produced definitely beneficial effects on the physical and mental health of the children.

31. In connection with the endeavours which have been made to improve the nutrition of the children, reference must also be made to the valuable co-operation of the Child Welfare Association with the Medical Department. This Association has for many years provided convalescent treatment, extra nourishment in the form of milk, etc., to suitable cases referred by the School Medical Officers. The number of references have steadily increased from under 100 before the War to 2,706 during 1929.

Provision is made for the worst cases of malnutrition and debility at the two residential Open Air Schools at Woolton Vale and Torpenhow, fuller reference to which is made under the section headed Special Schools.

The Committee have also made arrangements for the provision of Day Open Air Schools at Underlea (in the South End) and Eddesbury Lodge in West Derby in the coming year, where provision is to be made for the education of some of the less severe cases of debility.

PROVISION OF MEALS.

32. Under Sections 82-85 of the Education Act, 1921, free dinners have been provided for necessitous school children on week-days during term time and school holidays. The meals are cooked and served at certain centres, as shewn below.

COOKING CENTRES.

Addison Street Day Industrial School.
 Queensland Street Senior Special School.
 Whitefield Road Special School.
 Dingle Lane Special School.
 Northumberland Street (former) Day Industrial School.
 Walton Road (former) Day Industrial School.

DINING CENTRES.

Addison Street Day Industrial School.
 Banks Road Council School.
 Queensland Street Senior Special School.
 Whitefield Road Special School.
 Dingle Lane Special School.
 Northumberland Street (former) Day Industrial School.
 Chalmers Hall, Westminster Road.
 St. Titus' Hall, Portland Street.
 St. Thomas's (old) School, Upper Frederick Street.
 "Caledonian" (old) School, Oldham Street.
 St. Aidan's Hall, Commercial Road.
 "Major Lester," Council School, Sherlock Street.
 Heyworth Street Council School.
 Stanley Congregational Church, Green Lane.
 Leamington Road Council School.

33. On January 21st, in order to make provision for necessitous children in the housing area of Norris Green, a Dining Centre was opened, as a provisional measure, at the Leamington Road Council School. The Committee, however, were mindful of the fact that this district needed a Dining Centre of a more permanent character, and arranged for plans to be prepared by the Corporation Surveyor for a Meals Centre, to be erected on a site allotted by the Housing Committee at the corner of Strawberry Lane and Townsend Avenue.

The construction of the centre has proceeded satisfactorily, and it is expected that the premises will be opened after the Easter recess.

34. There are now seven local caterers in the outskirts who supply meals for small groups of children who, owing to distance, cannot attend one of the Committee's main Dining Centres, and one residential institution supplies meals for the necessitous children attending the Elementary School attached to the Institution. This centre and one at a local caterer's were opened by the Committee in June last.

35. No charge is made to the parents, but meals are not granted if it is considered that the parents are in a position to provide meals at home. Cases in receipt of Poor Law relief are notified to the Guardians through the Council of Voluntary Aid.

Before any prolonged holiday, the Head Teachers are requested to submit lists of children who, in their opinion, would require meals during the vacation, and the Committee have arranged for dinners to be supplied to these children. During the vacations, the numbers were about 60 per cent. of the average during school terms.

There are 141 schools out of a total of 184 elementary schools in the City in which free meal coupons are being issued to necessitous school children.

36. The Dining Centres were open on 311 days during the year, and the total number of meals supplied was 650,112, the daily average number of children who received meals being 2,090, or 246 more than the average for 1928.

The weekly number of meals provided varied during the year; the lowest being 6,686 in August, the highest 15,047 in December.

The Dining Centres are visited frequently by members of the Committee, and there is in operation a scheme whereby a rota of attendance of teachers and ex-teachers voluntarily supervise the children whilst at meals.

TONSILS AND ADENOIDS.

37. The number of children found at the routine examinations to require treatment for these defects was 809 (i.e., 1·9 per cent.), a slightly higher proportion than was noted during the four previous years. In addition, 703 children requiring treatment for these defects were seen as special cases.

In 538 instances, children who were found with moderately enlarged tonsils and adenoids were referred to Mr. Yorke, the Committee's Surgeon, for his opinion, and he recommended operation in 57·4 per cent. of these cases.

38. The Clinic was opened on 117 occasions, and, although only 12 beds were available, an average of 11·65 cases were treated per session. The total number of cases treated was 1,357, which included 31 special school cases.

The operations were as follows:—

Tonsils only	...	...	...	...	...	888
Adenoids only	...	...	...	...	...	115
Tonsils and Adenoids	...	...	...	...	...	354
						<hr/>
Total	...	...	...	...	...	1,357
						<hr/>

The anæsthetic used in every case was nitrous oxide gas, which is almost entirely devoid of the risk of bad effects, either at the time of operation or subsequently.

39. In about 7·9 per cent. of the cases hæmorrhage occurred after operation, and it was found necessary to apply the tonsil clamp, which was effective in every instance, though sometimes it was necessary to leave it on for several hours, and occasionally to re-apply it. These cases were subsequently followed up at the homes, 833 visits being paid during the year for this purpose.

In 10 cases in which tonsils had been removed, hæmorrhage occurred subsequently to the children being discharged from the Clinic; 4 of these cases were admitted to hospital, and 6 treated at home by the family doctor.

40. When the children are discharged from the Clinic the parents are given printed instructions with regard to the after treatment. These instructions advise that the child should be kept at rest for three days, and that only soft foods should be given.

The nurse also impresses upon the parent the importance of carrying out these instructions to diminish the possible risk of subsequent hæmorrhage, which experience has shewn does occur in rather less than 1 per cent. of the tonsil cases after their return home.

The result of home visitation which is carried out by the Health Visitors on the day following discharge of all cases from the Clinic has elicited the fact that advice concerning the children's after care was carried out in about only 70 per cent. of the cases. In a few instances the children had been sent to school or were out playing, one boy, 13 years of age, played a billiard match in a public hall on the night of his discharge from the Clinic, and blamed the Clinic Authorities for his defeat. One child had been given popcorns to eat and another peanuts. In the case of one child of the age of six, who had been given a glass of beer as the mother stated that she was unable to take the light diet recommended, the Health Visitor told the mother that beer was not advisable for children and gave advice as to suitable nourishment, but, on re-visiting the following day, found that the mother, having been informed that beer was inadvisable, had substituted stout for that beverage.

Whilst every possible care is taken of the cases when under treatment at the Clinic, and they are also systematically followed up at the homes by the Health Visitors who visit also on Sundays when necessary, it is unfortunate to find that such a large proportion of the parents are not rendering that co-operation in the after care of their children which might reasonably be expected.

DISEASES OF THE EAR.

41. At the routine examinations, 1.52 per cent. of the children were found to be suffering from inflammation of the middle ear (otitis media). From this it is estimated that there are **Discharging Ears.**

approximately 2,100 school children in the City suffering from this affection. This condition is responsible for a large number of the attendances at the Minor Ailments Clinics, over 1,200 cases having been treated at these Clinics during the year.

42. The electrical treatment for suppurative otitis media by means of zinc ionisation has been continued by Dr. F. P. M. Clarke, one of the Assistant School Medical Officers, and a report on the treatment of these cases appears at the end of this section under the heading of "Zinc Ionisation."

The following table shews in detail the classification of the cases dealt with at the Aural Clinic and the nature of the work undertaken:—

Table I.

Number of children examined	...	...	...	701
Chronic Suppurative Otitis Media:—				
Active: One ear	...	...	419	562 } 586
„ Both ears	...	...	143	
Quiescent	...	...	...	24 } 24
Deafness	...	...	...	69
Other ear conditions	...	...	...	82
Nasal conditions	...	...	...	74

Treatment.

				Individual Children.
Zinc Ionisation	...	...	...541 ears	513
Antiseptic Treatment	...	...	... 82 „	
Antiseptic Treatment followed by Ionisation	...	...	... 21 „	
Referred to Minor Ailments Clinic	...	...	...	75
Referred for Home treatment	...	...	...	12
Referred to Hospital	...	...	...	42
Treated by Nasal diastolisation	...	...	...	58*
Granulations removed	...	...	...	53
Wax, debris, etc., removed	...	...	...	24
Polypi removed	...	...	...	8
Referred for Tonsils and Adenoids removal	...	...	...	39
No treatment advised	...	...	...	20

* Attended in some cases on 12 or more occasions for treatment.

Zinc Ionisation.

43. The success of the Zinc Ionisation Clinic in the treatment of chronic otorrhœa, carried out at the North Corporation Schools, Blackstock Street, has continued to be very satisfactory. The methods of organisation and technique practised since the opening of the Clinic in 1925 have been continued with very little alteration and have been found to give excellent results. Correct technique and methodical organisation are absolutely essential, the methods adopted here being precisely those of Dr. Friel at the London County Council's Clinics.

44. Within the last two years a markedly increasing interest has been taken both by parents and teachers in the electrolytic treatment of otorrhœa. For the first two years many parents were sceptical and to a certain extent afraid of this form of treatment. Consequently, there was a good deal of difficulty in securing regular attendance and getting the parents to carry out the prescribed regulations necessary for the after-treatment. The situation is now completely changed, the parents being very interested, and very few cases fail to attend as required, whilst direct requests for treatment are much more numerous. Many teachers are also taking a keen interest in this treatment, and are of great assistance to the organisation of the Clinic by seeing that the children attend regularly for treatment.

45. Dr. Clarke reports that, in all, 644 ears were treated at the Aural Clinic, 578 being cases of chronic suppurative otitis media, i.e., those in which the discharge has existed for more than three months, whilst there were 53 sub-acute, and 13 acute cases. All the acute and sub-acute, as well as 37 of the chronic cases were treated by antiseptic methods, which sufficed except for 18 of the sub-acute and 3 of the acute cases which had eventually to be treated by zinc ionisation.

The three cases of acute otitis referred to above failed to respond to the ordinary antiseptic treatment regularly carried out for over a month. After two applications of zinc ionisation the ears became dry and have remained dry since.

46. Of the 562 cases treated by ionisation, 467 were cured, roughly 83 per cent. The percentage of cures remains very constant and works out about the same as that in London. The selection of suitable cases has been continued, for it must be recognised that there are certain types of cases quite unsuitable and for whom operative treatment offers the only hope of a cure.

47. The following classes of cases of chronic otorrhœa may be taken as unsuitable for ionisation:—

- (1) Extensive disease of the mastoid bone;
- (2) Old post-operative cases of mastoiditis where the discharge has persisted since operation;
- (3) Cases of cholesteatomata;
- (4) Extensive caries and bone destruction, as evidenced by masses of granulations and polypi;
- (5) Marked stenosis of the auditory canal.

48. During the year some interesting results have again been obtained. Cases of chronic otorrhœa where the discharge had persisted without cessation for over ten years and which had been fairly regularly treated by various forms of ordinary antiseptic treatment during that time, and had had tonsils and adenoids removed with a hope of removing the exciting cause of the infection, have been permanently cured by one or two applications of zinc ionisation. These instances prove a very important fact, that it is possible for a chronic infection, causing a regular purulent discharge, to remain located to the tympanum alone even for a considerable number of years, without an extension of the infection to the mastoid bone. This is contrary to the generally accepted tenets of Aural Surgery, which hold that if the discharge persists for over three months in spite of suitable antiseptic treatment and removal of possible exciting causes, the disease has involved the mastoid bone and requires a radical operation for its cure.

The work of Dr. Friel and others skilled in the technique of electrolytic medication has completely disproved this theory,

and it is now definitely established that the correct use of ionisation can permanently cure a very large percentage of cases of chronic otorrhœa which otherwise would require to undergo a radical mastoid operation in order to cure the condition.

49. Two other interesting facts, also, are commonly observed in connection with ionisation treatment. The first is the relatively small number of recurrences, as compared with those treated by ordinary antiseptic treatment.

The second fact is the great improvement in *hearing* frequently noticeable almost immediately after ionisation, and compared again with antiseptic treatment. The hearing is usually very greatly improved, and may in many cases be completely restored when the ears become quite dry.

Table 2.
Return of "Discharging Ears" treated by Zinc Ionisation
(Friel's Classification).

Causes of Suppuration.	Total.	Cured.	Im- proved.	Left School or lost sight of	Referred for other treatment.	Still under Treatment on 31.12.29
CHRONIC SUPPURATIVE OTITIS MEDIA.						
I. Tympanic conditions solely :—						
(a) Tympanic Sepsis	317	291	—	6	—	20
(b) Tym. Sep. + Granulations	74	53	7	3	6	5
(c) do. + Polypi	14	8	2	—	2	2
(d) do. + Caries	19	7	2	1	7	2
II. Tympanic conditions combined with :—						
(a) Tonsils and Adenoids	33	26	—	3	—	4
(b) Nasal Conditions	71	63	—	2	2	4
III. Tympanic conditions combined with :—						
(a) Attic Disease	8	4	—	—	4	—
(b) Mastoid Disease:—						
(1) Previous Operation	3	3	—	—	—	—
(2) No Operation	6	—	—	1	5	—
IV. Tympanic conditions combined with :—						
(a) External Otitis	7	5	—	—	—	2
(b) Stricture of Meatus	4	1	—	—	2	1
V. External Otitis	6	6	—	—	—	—
TOTALS	562	467	11	16	28	40

Notes on Some Special Cases.

1. A.E., a girl 12 years of age, who had a profuse offensive discharge from the ears since infancy and who was so deaf that she had to be taught for some years at the School for the Deaf. A radical mastoid operation had been performed some years ago on the left ear, but the discharge was not cured. The child attended Hospital almost daily for treatment for some years. After three applications of zinc ionisation to the right ear and six applications to the left ear the discharge ceased, and the hearing so greatly improved that it was found possible for the child to leave the School for the Deaf and return to her ordinary school.
2. W.L., a boy 13 years old, had offensive discharge from both ears for seven years and was very deaf. He had attended Hospital and Minor Ailments Clinics at intervals and had regular treatment for the ears by antiseptics. The removal of the tonsils and adenoids effected no improvement in the discharge. After two applications of zinc ionisation for both ears and one application of zinc electrolysis for some granulations in the left ear the discharge entirely ceased and the hearing improved greatly.
3. R.R., a girl 5 years of age, who has had for three and a half years a discharge from both ears following an attack of scarlet fever. She had been under treatment at the Hospital and Minor Ailments Clinic, but without success. After one application of zinc ionisation the discharge ceased, and there had been no relapse seven months later when the child was last seen.

DENTAL INSPECTION AND TREATMENT.

50. The Dental Staff was augmented during the year by the appointment of Mr. A. Brewer, L.D.S., who commenced duty in September.

Attention has frequently been drawn in these Reports to the urgent need for the establishment of dental facilities for the public

elementary school children in the Garston and Woolton areas, and although the new Clinic premises at Clifton Street are not yet available, it was felt that advantage should be taken of this increase in staff to effect a beginning in the treatment of the children in this district. Arrangements were accordingly made whereby a room in the Garston Technical School could be utilised pending the opening of the Clifton Street premises early in 1930, and in September 16 schools in this area were added to the Dental List and treatment was begun.

It is gratifying to be able to report that the acceptances for the schools concerned was considerably more satisfactory than for the City as a whole, and that in those schools so far completed an average of 46 per cent. of the children who were found to need treatment made application to receive it.

51. There is still great need for the extension of the Dental Scheme, particularly in the new housing area at Norris Green, where the provision of a new Clinic is at present under consideration, and in the Walton district where there are a large number of children for whom no dental facilities exist, the Netherfield Road Clinic, the nearest available treatment centre, being already taxed to the limits of its capabilities.

52. The following Table shews the work carried out under the Dental Scheme for the children attending the public elementary schools, together with the corresponding figures for the previous two years:—

	1927.	1928.	1929.
Number of children examined in School	65,111	64,092	55,789
Number of children requiring treatment	47,999 (73·7%)	47,645 (74·3%)	43,526 (78·1%)
Number of cases accepting treatment under the Dental Scheme	15,474 (32%)	14,994 (31·5%)	16,555 (38%)
Number of cases treated	13,786	15,217	15,570
Number of Schools visited	100	100	90

It will be seen that the number of schools inspected and treated during the year is less than that of the previous year. Owing to the larger number of children availing themselves of the offer of treatment, it has been found impossible to complete more than 90 of the 117 schools now included in the list, so that a further addition to the staff of Dental Officers during the forthcoming year is highly desirable.

53. An encouraging feature of the year's work is shewn by the fact that the proportion of acceptances has reached the highest figure yet attained in Liverpool, viz., 38 per cent. Whilst this proportion is less than that of many other areas, and compares unfavourably with the figure of 58 per cent. which is quoted for the country as a whole, an increase of 6·5 per cent. when dealing with such large numbers marks a distinct advance in the success of the Dental Scheme.

54. The foregoing Table, in conjunction with the report on the actual work carried out (Appendix A. Table IV, Group IV) shews that while the increase in the number of children treated is small (353), the increase in the amount of work done has been considerable, viz., additional fillings 638, extractions 4,598, and administrations of gas 754. This increase in acceptances brought under treatment a number of children who had never before had dental treatment, and whose mouths in consequence required much more attention than those of children who had previously received regular treatment.

**Excessive
Extraction
Rate.**

55. The large proportion of permanent teeth requiring extraction, to which attention was drawn in the last Report, has still further increased from the figures then quoted of 37 teeth per 100 children treated, to 40 teeth per 100 children treated. This increase is entirely due to the larger number of new cases treated.

The beneficial effect of regular treatment is borne out by the experience in the Hightown Residential Industrial School, where conservative treatment is regularly carried out each year. In less than three years, since the School Dental Service undertook the

treatment of these children, the proportion of extractions necessary has fallen from 88 teeth to 30 per 100 boys examined. It will thus be seen that the essential factor in the dental treatment of children, if it is to be of lasting value, is the regularity of their attendance whenever notified that such treatment is necessary.

56. Ignorance in regard to the necessity for, and the nature of, dental treatment for children is surprisingly widespread. School Dental Officers are frequently told by parents that "first teeth do not matter," that "teeth with abscesses must not be extracted," and that "fillings are unnecessary and dangerous." Belief in such fallacies is responsible for much suffering and ill-health in children. Such parents, when the true facts have been explained to them at the Clinics, almost invariably express regret that they have handicapped their children through their own lack of knowledge. In many cases irremediable damage has already been done by the time urgent necessity has required the visit to the Clinic, and there is no doubt that the enlightenment of both parent and child in regard to simple dental hygiene would not only be wholly desirable from the point of view of the health of the community, but would in time result in a material decrease in the cost of the Dental Service.

STAMMERING.

57. During the routine examinations at the schools 237 children suffering from this defect were discovered, the stammer being moderate or severe in degree in about one-third of the cases; a further 116 children were also examined by the Medical Officers as special cases.

The incidence of stammering amongst the children discovered at the routine examination was:—Entrants, 0·18 per cent.; Intermediates, 0·61 per cent.; Leavers, 1·03 per cent.

58. Since the opening of the classes for stammerers in August, 1927, at the old North Corporation School, Bevington Bush, 280 children have been admitted. Each class is limited to 10 in number,

the children being required to attend for a session of one hour on two occasions per week.

Before admission to the classes, the children are examined by one of the School Medical Officers, and the parents are advised as to the remedy of any physical defects present, and again before discharge from the class they are re-examined by the Medical Officer, on whose recommendation they are permitted to leave the class. The duration of the treatment necessarily varies considerably, as it depends upon numerous factors, such as the child's intelligence and interest, parental co-operation, etc., but generally speaking, treatment is necessary for a period of about six months.

59. Experience of over two years' working of the classes has shewn that approximately 60 per cent. of the children who have attended have been discharged as cured. In about half of the remainder, though the majority shewed marked improvement, the children were in their final school year when admitted, and the duration of their attendances at the classes was insufficient to enable firmly established stammers to be eradicated.

No stammerer can be cured unless the child not only is anxious to be cured, but also does everything possible to co-operate with the teacher. Indifference and apathy of some of the parents with regard to this defect is still encountered. A certain number of parents refuse to allow their children to attend the class, under the impression that they "will grow out of it." Many of them have the idea that a stammer should be cured by the teacher without any effort on the part of the child, and they do not appreciate the fact that when a stammer has existed for many years it often takes months to eradicate the "fear of stammering" before even any attempt can be made to teach the principles of correct speech.

60. Usually the most successful cases are those in which the parents themselves have applied for the admission of their children to the class, the better results obtained being due to the parents being interested and personally superintending the children's daily practice and generally helping them at home as advised.

The treatment for the first month usually consists largely of learning complete relaxation and practising concentration exercises, e.g., bead threading, and movements requiring perfect rhythm and co-ordination, finger exercises, etc., no attempt being made to produce speech until all the muscular tension and inco-ordination have been corrected.

61. In some cases where the stammer is associated with defective eyesight, correction of the visual defect is essential to the cure, but unfortunately it is found that many of the children do not bring their glasses to the class.

TUBERCULOSIS.

62. At the routine inspections 5 definite and 7 doubtful cases of phthisis were discovered, and, in addition, 121 cases of tuberculous glands and 99 cases of other forms of tuberculosis, a total of 232 cases, or 0·54 per cent. of the routine cases.

There were also examined at the Inspection Clinics, or as special cases at the schools, 68 definite or suspected pulmonary cases and 117 other forms of tuberculosis.

63. All cases of actual or suspected tuberculosis discovered by the School Medical Officers are referred to the Tuberculosis Officers for examination. The number of references so made was 139, whilst the Tuberculosis Department supplied information with reference to 2,472 school children who had been reported from various sources as possible cases of tuberculosis, but the majority of these, however, proved to be non-tuberculous. Of the 2,472 references received, 1,297 were new cases, of which 847 were non-tuberculous.

64. At the end of the year the total number of children of school age known to the department to be suffering from active pulmonary tuberculosis was 285, whilst the non-pulmonary cases numbered 208. Of the 285 cases of pulmonary tuberculosis, 112 were in institutions, chiefly Fazakerley and Broadgreen Sanatoria, where special open-air classes were arranged for those children whose state of health permitted.

65. Dr. Rundle, the Medical Superintendent of the Fazakerley Sanatorium, reports that the average daily number of children receiving instruction in the school attached to the Sanatorium for the year was 60, comprised as follows:—

Pulmonary cases with negative sputum	...	...	42
Pulmonary cases with positive sputum	...	...	16
Non-pulmonary cases	...	...	2

The treatment of ears, nose and throat has been carried out during the year when required, but owing to the early age of many of the patients and the advanced stage of the disease, it has been thought advisable to remove tonsils in only a few cases.

The services of the Dental Surgeon have been regularly available as in previous years, and dental treatment has been carried out where necessary for the relief of pain or oral sepsis.

66. The Head Teacher makes the following report:—

“The number of scholars who have received lessons (in
 “both wards and schoolroom) is 83. There have been 37
 “discharged and 5 deceased, leaving 41 at present on the
 “roll. We usually commence the morning session with a
 “ten minutes’ chat on the weather, birds, plants and flowers.
 “This is followed by a glance at the picture page of one of the
 “daily newspapers, which encourages the children to take an
 “intelligent interest in the chief events of the day. In fact,
 “English, History and Geography are indirectly taught by
 “this means. The rest of the morning is spent at Arithmetic,
 “Reading and Writing. Afternoons are devoted to Hand-
 “work, which includes the making of raffia-work baskets,
 “cane work, leather work, sewing, the making and repairing
 “of scholars’ own clothes, shell-flower making, and framing
 “pictures with passe partout. A weekly practical lesson in
 “Cookery is taken, whereby the children are trained in

“cleanliness, tidiness, and economy of the kitchen. Valuable lessons in Arithmetic are thus pleasantly co-ordinated with this manual work. Songs and games are also included in the curriculum whenever possible; instruction is given in the open air. Nature works are enjoyed in the extensive grounds of the Sanatorium, and each pupil cultivates his or her plot in the school garden.”

67. Dr. Macintyre, the Medical Superintendent of Broadgreen Sanatorium, reports that during the year 16 girls and 24 boys were admitted to the school, and a similar number left. The average attendance was 30·6. Broadgreen
Sanatorium
School.

The morning sessions have as usual been chiefly devoted to the “Three Rs.” Afternoon periods are for the most part given up to handwork, private reading, story telling, and singing.

The following branches of handwork have been taught:—Sewing—two frocks per girl have been made, together with sets of underclothing, and the frocks required for the Annual Concert given by the children, as well as other miscellaneous work, also knitting, raffia work, cane work, rug-making, fretsaw work, pewter work, drawing and painting. During the Summer season, gardening again took the form of the cultivation of individual plots, and many of the children displayed a keen interest in their work.

In conclusion, reference must again be made to the value of the Sanatorium School as an adjunct to Sanatorium treatment, as well as its educational value to the child who, as so often is the case, is very backward through prolonged absence from school before admission.

MINOR AILMENTS.

68. The term minor ailments includes certain skin conditions such as impetigo, parasitic affections such as ringworm and scabies,

external eye diseases, discharge from the ears, septic scres, minor injuries, cuts, etc.

By prompt, effective and regular treatment a good deal of disease is undoubtedly prevented from becoming serious and disabling. Moreover, treatment at the Committee's various Clinics prevents a good deal of loss of school attendances and secures an earlier return to school in the case of many absentees.

External Eye Diseases.

69. Under external eye diseases are included blepharitis, conjunctivitis, keratitis, and corneal ulcers. There were 495 cases (1·2 per cent.) discovered at the routine examinations, one-half of these being cases of blepharitis. In addition, 306 cases were also seen as special cases. Many of these defects, particularly blepharitis, are chronic when first discovered, a large number having commenced during pre-school life, most frequently as a sequela of an attack of measles.

Scabies.

70. The number of children reported as suffering from scabies was 249, as compared with 258 in 1928, 449 in 1923, and 898 in 1921. It was found necessary during the year to make use of the special facilities for treatment at Beacon Street Cleansing Station for only 9 of the cases.

71. During the year, 22,581 cases were treated at the Minor Ailments Clinics, altogether 294,489 attendances having been made by the children, the average number of attendances per child being 13·4.

The number attending daily at these Clinics fluctuates considerably, the attendance on some occasions being more than double the average daily attendance for the year. The largest number that attended on any one session was 402 at the North Corporation Clinic.

The following table shews the number of defects treated and the average daily attendance at the various Clinics:—

Table 3.

Shewing the number of defects treated at the Minor Ailments Clinics and the average daily attendance at each Clinic.

DEFECTS TREATED.	NAME OF CLINIC.						TOTALS.
	St. Gabriel's.	Erskine Street.	North Corporation.	Westminster Road.	St. Dunstan's.	Old Swan.	Garston.
SKIN DEFECTS—							
Ringworm of the Body	69	45	52	43	22	13	2
Impetigo...	493	667	191	341	1,122	159	12
Other Defects ...	189	164	373	503	85	80	14
EAR CONDITIONS—							
Wax ...	67	54	74	57	19	22	11
Otorrhoea ...	214	249	282	228	131	54	76
Other Defects ...	45	48	76	52	56	18	51
EXTERNAL EYE DISEASE—	450	497	941	471	291	94	154
MISCELLANEOUS DEFECTS— (Sores, Minor Injuries, etc.)	2,202	2,825	3,132	1,485	1,750	827	939
TOTALS ...	3,729	4,549	5,121	3,180	3,476	1,267	1,259
Average daily attendance ...	212.4	195.8	193.9	130.1	123.3	82.7	57.0
Avreage daily attendance excluding Saturdays ...	248.9	228.7	226.9	153.2	145.4	96.1	66.2

RINGWORM OF SCALP.

72. There were 209 cases of the disease (18 of these coming from schools other than public elementary schools), as compared with 234 in 1928, 268 in 1927, and 296 and 426 in the preceding two years. The reported cases are examined as soon as possible at various centres in the City by certain of the School Medical Officers who have had special experience in this work, the cases being re-examined at frequent intervals in order that they may be re-admitted to school as soon as a cure has been effected.

The number of cases outstanding at the end of the year was 93, compared with 103, 111, 135, and 179 for the preceding four years. These figures afford additional evidence that the disease is gradually becoming less prevalent.

73. The following table shews in percentages the duration of the cases outstanding at the end of the year, the figures for the preceding three years being also given for the purposes of comparison.

Table 4.

Duration.			1926	1927	1928	1929
Under 3 months	...	...	32·5	31·7	21·9	24·0
3 to 6 months	...	...	30·6	35·6	31·3	31·6
6 to 9 months	...	...	16·2	11·5	17·7	20·3
9 to 12 months	...	...	7·2	8·7	11·4	6·4
12 to 18 months	...	...	6·3	7·7	9·4	11·3
Over 18 months	...	...	7·2	4·8	8·3	6·4
			100·0	100·0	100·0	100·0

X-Ray Clinic. 74. The X-Ray treatment of the disease has been continued at the North Corporation Treatment Centre, the Clinic being opened on

44 occasions and 107 new cases treated, 18 of these coming from schools which were not public elementary schools.

75. An outbreak of Ringworm at the Hightown School (a residential Industrial School for 150 boys maintained by the Committee), which originally began in 1928, recrudesced during the year, and the assistance of the School Medical Department was asked for in October with a view to advice in dealing with the outbreak.

The cases where the disease affected the skin presented no difficulties, being easily recognised by the staff and soon cured. The scalp cases, however, were all atypical and difficult to recognise, whilst in several the diagnosis could only be made with certainty with the assistance of the microscope.

A careful examination of the heads of all the boys was made on two occasions, and several unrecognised cases were discovered. On other occasions only boys who had previously had the disease were specially examined, as well as any doubtful cases brought forward by the Staff. All the definite cases were isolated and X-Ray treatment was arranged. The outbreak was due to the large spored variety of the ringworm fungus (a type extremely rare in Liverpool), practically all the cases being atypical clinically, and usually confined to several very small areas, each involving one or two hairs only and the skin of the scalp around these hairs. This being so, the examinations had to be very carefully carried out in order not to miss cases. Only one fresh case has up to the time of writing the report been discovered.

UNCLEANLINESS.

76. At the routine examinations 18·2 per cent of the girls and 6·0 per cent. of the boys were found by the Health Visitors to have verminous heads, whilst the bodies and clothing were infected in 0·76 per cent. of the boys and 0·29 per cent. of the girls. During the twelve months under consideration the Health Visitors made altogether 186,074 examinations *re* cleanliness, and in 11,666 instances the children were found to be verminous or very dirty.

77. The usual procedure adopted in such cases is to send the parent a printed notice drawing attention to the condition, and giving instructions as to the proper method of remedying the condition. If this intimation is not complied with, a further notice is sent drawing attention to the parents' legal obligation to cleanse their children, and in many instances visits are also paid to the homes, when, if there do not appear to be the requisite facilities for cleansing, the Health Visitors recommend the parents to take the children to the nearest of the three cleansing stations. In 812 instances, however, these steps proved ineffective, and it was found necessary to put Section 460 of the Liverpool Corporation Act, 1921, into operation, statutory notices being served in these cases. This Section, which is similar to but less cumbersome to work than Section 87 of the Education Act of 1921 requires the parents properly to cleanse their children within 24 hours after the receipt of the statutory notice.

Of the 812 children in question, the parents complied with this notice in 769 instances, the remaining 43 children being compulsorily cleansed by the staff.

**Legal
Proceedings.**

78. Legal proceedings were taken under the Section against the parents in respect of 15 of the children who had been compulsorily cleansed, with the following result:—

Fined	...	...	...	...	...	3 cases
Discharged with a caution	...	...	...	...	...	9 ,,
Withdrawn	...	...	...	...	...	3 ,,

**Cleansing
Stations.**

79. The three cleansing stations were well utilised throughout the year, 10,848 attendances having been made at Beacon Street, 4,233 at Mansfield Street, and 4,453 at Smithdown Lane; whilst during the winter months, by arrangement with the Baths Committee, 11,913 attendances were made by school children at the various public slipper and spray baths. Of the 19,534 attendances at the cleansing stations, 5,513 were on account of verminous conditions.

INFECTIOUS DISEASES IN SCHOOLS.

80. The usual infectious diseases were slightly more prevalent than in the previous year, 10,128 cases of children of school age being reported as against 11,941, 10,832, 8,750, and 9,876 for the

years 1925 to 1928 respectively. There was a very considerable increase in the number of cases of measles over that of the previous year, a severe outbreak occurring in the winter and spring. This outbreak was also complicated by an epidemic of influenza in the first quarter of the year. This was the most severe outbreak since 1918-1919, but fortunately culminated just before the very hard spell of frosty weather.

81. In the autumn, diphtheria and scarlet fever became widespread, nearly double the number of school cases of the latter disease occurring in 1929 than in 1928, but it was not found necessary to close any schools solely on account of the two diseases.

Whooping cough, chicken pox and mumps were less prevalent than in 1928. There were six cases of encephalitis lethargica amongst children between the ages of 5 and 15, two of which proved fatal.

82. Special action had to be taken on account of infectious diseases during the year as follows:—Schools or parts of schools were closed for influenza in 99 cases; Infants' Departments were closed in 4 cases for measles and influenza, in 6 cases for measles, and in 2 for measles, influenza, etc., and in 1 case on account of the simultaneous outbreak of diphtheria and chicken pox.

On several occasions the exclusion of all children who had not previously suffered from the disease was found practicable. This procedure is not always feasible, as it would in most instances reduce the attendance below that which would render it worthwhile to keep the Department open. Further, when outbreaks of two diseases occur simultaneously, this method is not likely to be successful. The recent alteration of the rules of the Board of Education has, however, permitted more flexibility in the methods which can be taken to suppress epidemic diseases.

83. The following tables shew the number of cases of the common infectious diseases, with the ages of the children affected, and the monthly distribution of the cases:—

Table 5.

SCHOOL CASES OF INFECTIOUS DISEASE.

Age Distribution.

Disease.	Under 5	Under 6	Under 7	Total Under 7	Under 8	Under 9	Under 10	Under 11	Under 12	Under 13.	Under 14	Over 14	Total 7 and over	GRAND TOTAL.
Diphtheria ...	24	173	181	378	158	133	126	74	51	51	44	20	657	1,035
Scarlet Fever ...	27	284	369	680	282	292	252	168	120	124	93	47	1,378	2,058
Whooping Cough	58	393	279	730	76	29	17	8	5	1	4	4	144	874
Chicken Pox ...	44	443	456	943	304	163	121	58	38	22	20	9	735	1,678
Mumps ...	10	110	148	268	91	64	45	27	22	11	21	3	284	552
Measles ...	215	1,405	1,151	2,771	599	199	118	61	52	55	47	29	1,160	3,931
	378	2,808	2,584	5,770	1,510	880	679	396	288	264	229	112	4,358	10,128

Table 6.

SCHOOL CASES OF INFECTIOUS DISEASE.

Monthly Distribution.

Disease.	Jan.	Feb.	March.	April.	May.	June.	July.	August.	Sept.	Oct.	Nov.	Dec.	Totals.
Diphtheria ...	95	40	69	59	65	70	73	39	113	124	140	148	1,035
Scarlet Fever ...	96	74	73	102	124	119	129	137	278	330	298	298	2,058
Whooping Cough ...	123	67	82	105	84	138	29	62	62	31	51	40	874
Chicken Pox ...	178	94	153	165	222	243	78	29	39	99	179	199	1,678
Mumps ...	186	124	93	53	33	25	1	5	10	1	12	9	552
Measles ..	282	331	387	511	1,207	809	256	29	54	34	22	9	3,931
	960	730	857	995	1,735	1,404	566	301	556	619	702	703	10,128

NOTIFICATION OF DEFECTS AND FOLLOWING UP.

Presence of Parents.

84. During 1929 the parents attended the routine examinations as follows—in the case of the Entrants 80·0 per cent., in the case of the Intermediates 45·4 per cent., but the percentage of parents attending the medical examination of the group of Leavers was only 16·8 per cent. Should the parents not be present at the time of the examination, and it be considered particularly desirable to discuss the health of their children with them, special efforts are made to secure their attendance on a subsequent occasion.

The scheme for the notification to parents of any defects found at the examination of their children, and the subsequent following up of such notification, remains the same as that described in previous Annual Reports.

The accompanying Table 7 shews the number of notices given or sent to parents concerning the various defects for which treatment was considered necessary, the numbers for 1928 being given for comparison.

Table 8 gives the results of the following up by the different agencies undertaking the work.

Table 7.

Notification to Parents re Defects.

Defects.	First Notices.		Second Notices.		Third and subsequent Notices.		Totals.	
	1928	1929	1928	1929	1928	1929	1928	1929
Defective Vision :—								
A.—Untreated cases	3,654	3,369	431	444	31	65	4,116	3,878
B.—Previously treated cases :								
(i) Glasses lost, broken, or unsuitable.....	3,569	3,259	47	22	4	1	3,620	3,282
(ii) Glasses not being worn ...	1,171	1,088	205	184	42	43	1,418	1,315
Eye conditions	99	92	2	4	—	—	101	96
Defective Hearing	17	24	1	1	—	—	18	25
Otorrhœa	63	53	2	3	—	—	65	56
Other Ear conditions	42	37	1	3	1	—	44	40
Enlarged Tonsils and Adenoids ...	2,042	1,919	200	172	18	40	2,260	2,131
Mouth Breathing	747	669	57	78	12	3	816	750
Defective Teeth :—								
A.—Referred by School Medical Officers	1,572	1,450	210	432	56	61	1,838	1,943
B.—Referred by School Dentists	47,645	43,526	—	—	—	—	47,645	43,526
Anæmia and Malnutrition	278	385	6	10	—	—	284	395
Skin conditions	110	92	3	1	—	—	113	93
Chest	261	206	6	6	—	—	267	212
Deformities	103	119	1	3	—	—	104	122
Other defects	832	868	34	39	4	13	870	920
Totals	62,205	57,156	1,206	1,402	168	226	63,579	58,784

Table 8.
Results of Following Up.

Following-up Agencies.	Carried over from previous year.	Referred during 1929.	Total.	Treated at School Clinics or elsewhere.	Treatment refused or evaded.	Left School, etc.	Total reported upon.	Cases still under observation at end of year.
SCHOOL ATTENDANCE STAFF—								
Vision	1,419	6,205	7,624	4,798	1,322	202	6,322	1,302
Dental: School Dentists' cases	12,027	43,526	55,553	16,632	28,087	874	45,593	9,960
Tonsils and Adenoids ...	362	2,158	2,520	1,562	555	30	2,147	373
Ringworm of Scalp ... (<i>per</i> X-Ray treatment)	5	165	170	105	59	—	164	6
HEALTH VISITORS' STAFF—								
Medical defects ...	276	599	875	239	439	26	704	171
General Neglect ...	361	2,080	2,441	2,187	—	—	2,187	254
Verminous ...	1,379	10,961	12,340	10,710	—	—	10,710	1,630
CHILD WELFARE ASSOCIATION—								
Medical defects ...	491	2,706	3,197	2,423	270	13	2,706	491
OTHER AGENCIES—								
Medical defects ...	14	37	51	42	8	1	51	—

VACCINATION.

85. The following table shews the proportion of vaccinated and un-vaccinated children in the Public Elementary and Higher Schools, and the relative degree of immunity of those vaccinated as evidenced by the number of marks present.

Table 9.

Code Group.	Number examined.	Vaccinated.					Not Vaccinated
		One mark.	Two marks.	Three marks.	Four marks.	Total.	
Public Elementary Schools.							
Entrants	15,182	19·3%	10·3%	4·7%	46·4%	80·7%	19·3%
Intermediates ...	14,948	20·9%	10·9%	5·0%	42·6%	79·4%	20·6%
Leavers	11,521	20·7%	10·0%	5·2%	47·8%	83·7%	16·3%
Total	41,651	20·2%	10·5%	4·9%	45·5%	81·1%	18·9%
Higher Schools.							
All ages	6,064	23·3%	26·8%	9·1%	22·2%	81·4%	18·6%

INSPECTION CLINICS.

86. In addition to the work undertaken by the School Medical Officers at the schools and at the treatment Centres, the services of the doctors were utilised in the examination of absentees, children requiring certificates for employment, and certain special cases at the request of either the parent or the teacher.

These examinations are conducted mainly on Saturday mornings and during the school holidays at "Inspection Clinics" which, for the convenience of parents, are held at 14 centres distributed over the City. The total number of examinations at these centres during the year was 8,062, of which 6,076 were made at the Central Inspection Clinic at the Education Office.

87. Children absent from school for any prolonged period are **Absentees**, also examined by the School Medical Officers, except such cases as are known to be under regular medical treatment by practitioners or at institutions.

The following Table shews the defects from which the children, who were examined with regard to their fitness to attend school, were suffering, along with the total number of examinations made.

Table 10.
Examinations of Absentees.

DEFECT.	Total No. of examina- tions.	Children re-admitted to school.
Ringworm of Scalp	655	199
Scabies	457	201
Other skin conditions	122	61
Eye diseases	98	25
Ear diseases	20	11
Phthisis and (suspected) Phthisis	111	20
Other chest conditions	163	59
Tuberculosis other than Phthisis	111	43
Injuries and other Crippling Defects	132	38
Heart	213	69
Rheumatism	95	22
Anæmia and Debility	354	127
Nervous conditions	111	36
Other defects	113	32
No defect found	9	9
TOTALS	2,764	952

EXCLUSIONS FROM SCHOOL.

88. The following table shews the number of children excluded from school by the Medical Officers in the course of their inspections, or at the various treatment Clinics, and the defects for which they were excluded. The numbers for the preceding years are also given for comparison. The considerable increase noted in the previous two years in the number of exclusions on account of eye diseases, which was due to several rather extensive outbreaks of conjunctivitis, has this year shewn a marked diminution.

Table 11.

Defect.	1926	1927	1928	1929
Eye diseases	242	600	774	364
Scabies	88	76	97	120
Ringworm of body	100	30	12	5
Ringworm of scalp	175	157	113	96
Other skin conditions	213	169	176	195
Infectious diseases	296	97	181	94
Pediculosis	39	9	8	12
Chest conditions (non-tuberculous)...	26	15	10	14
Tuberculosis (all forms)	9	13	7	3
Otorrhoea	12	9	11	8
Miscellaneous	298	271	271	265
TOTALS	1,498	1,446	1,660	1,176

SCHOOL PREMISES.

89. The School Medical Officers, on the completion of their annual routine examinations at the various schools, make a report on the conditions of the premises with regard to such items as the efficiency of the heating, lighting, ventilation, etc. When considered necessary, references with regard to the defects found are made to the appropriate quarters.

90. The Surveyor has kindly supplied the following particulars relating to improvements made in connection with Public Elementary Schools during the year 1929.

LISTS OF IMPROVEMENTS MADE DURING 1929 IN VARIOUS SCHOOLS.

Improvement of Natural Lighting.

Upper Park Street School, Boys' Department	} Roof lights and enlargement of windows.
Steers Street School, All Departments	...	...
Lawrence Road School, Junior Boys' Department	...	...
Webster Road School, Junior Boys' Department	...	...

Installation of Electric Lighting in place of Gas Lighting.

Walton C.E. School	...	...	...	...	...	All Departments.
Bishop Goss R.C. School	...	...	...	...	...	do.
Earle Road School	...	...	...	...	...	do.
Granton Road School	...	...	...	...	...	do.
Venice Street School	...	...	...	...	...	do.
Webster Road School	...	...	...	...	...	do.
Longmoor Lane School	...	...	...	...	...	do.
St. John's C.E. School, Tuebrook	...	...	...	...	...	do.
St. Athanasius C.E. School	...	...	...	...	...	do.

Improvement of Offices.

Harrington School	}	Pedestal W.C.'s substituted for trough closets.
Earle Road School		

Improvement in Heating Installations.

Townsend Lane School	...	...	...	...	...Infants' Department.
St. John's C.E. School, Tuebrook	...	...	...	...	All Departments.
Lister Drive School	...	...	...	...	do.
Westminster Road School	...	...	...	...	do.
Northcote Road School	...	...	...	...	do.
Longmoor Lane School	...	...	...	...	do.
Broadgreen Road School	...	...	...	...	...Infants' Department.
Sacred Heart R.C. School	...	...	...	...	do.
Dingle Lane Special School	...	...	...	...	All Departments.

Schools Reconstructed and Modernised.

- Earle Road.
- Webster Road.
- Longmoor Lane.
- Lawrence Road.

Large Classrooms divided into Separate Rooms by Sliding Screens.

- Tiber Street.
- Dovedale Road.
- Sudley Road.
- Vine Street Wesleyan.
- St. John's C.E., Tuebrook.

Playgrounds Reconstructed.

St. Clement's C.E.	...	...	...	Boys' and Girls' playgrounds paved.
St. Anthony's R.C.	...	...	...	Girls' playground paved.

91. The District Sanitary Inspectors visit all the Public Elementary Schools every fortnight for the purpose of examining the sanitary arrangements and the water supply. During the year, 124 defects were discovered, and notices relating to these defects were sent to the Corporation Surveyor, or the Managers of the Schools.

SPECIAL SCHOOLS.

92. Full provision exists for the education of all blind children, who are taught either as boarders or day scholars, as indicated in the accompanying table:—

Schools for the Blind.

School.	Boarders.	Day Scholars.
Wavertree School for the Blind	11	8
Catholic Blind Asylum, Brunswick Road ...	15	1
Taught privately	—	2

93. The three sight-saving classes in connection with the Birchfield Road, St. James' Council, and Christ Church C.E. Elementary Schools have carried on their useful work smoothly and efficiently during the year, the average number on the rolls of these classes being 121, and the percentage average attendance 81.6.

Sight-saving Classes.

The work and progress of these Classes is most satisfactory, and one is struck by their value to these handicapped children, who would otherwise be uncatered for in the classes of ordinary schools. The change in demeanour from a sullen, reticent child to a bright and interested one is frequently seen, and is most gratifying, and the existence of these valuable and humane adjuncts to a sound educational system is year by year increasingly justified.

94. During the year, the experiment was tried in one of the Classes of utilising specially printed books in very large type, an experiment which proved a great success. These books, unfortunately, are comparatively expensive, but as they were found to be so useful the Committee decided to obtain a further supply and to circulate them between the Special Classes in the three schools concerned instead of supplying each of the Classes with a separate set.

95. There can be no question but that these classes are appreciated by the parents of the defective sighted children. One of the main obstacles in securing the children's admission to the classes is the difficulty which the parents experience in sending the children any distance to these classes. In the case of St. James's School, this difficulty has been largely overcome by making use of the motor bus which collects the physically defective children for Dingle Lane Special School. No special provision has yet been made for the education of the defective sighted Roman Catholic children, of whom there were 25, being educated under unsuitable ocular conditions and with irksome restrictions in the ordinary public elementary schools.

96. Dr. Livsey, the Committee's oculist, visits the classes periodically and keeps the individual children under observation, recommending modification of the curriculum where necessary. When the children are due to leave the classes, the parents are interviewed, and advice is given as to suitable occupations. It is naturally not an easy matter to find suitable work for these children at the present time, but their interests are being specially looked after by the Special Schools Employment Officer who has recently been appointed on the staff of the Juvenile Employment Bureau.

97. With regard to the education of the deaf, the Committee have one Day School with 166 scholars on roll, 117 of these being Liverpool children, of whom 16 are boarded by the Committee in

the Institution for the Deaf close to the Day School. Forty-nine children from other areas, who receive their education at the Day School, are also resident at the Institution. The Committee also pay for the board and education of certain Roman Catholic deaf children at Boston Spa; at the end of the year there were 10 Liverpool children boarded there.

98. There were, at the end of the year, six Day Special **M.D. and P.D. Schools.** Schools for physically and mentally defective children, whilst there was also one Residential Country School at Woolton Vale for delicate children.

99. In January, 1929, the new school for senior mentally defective boys was opened at Queensland Street, with a roll of 180 **Queensland Street Senior Special School** boys and a staff consisting of a headmaster, five assistant teachers, and three craft teachers. The crafts taught have been woodwork, light metal-work, and boot repairing, and the boys have developed not only keen interest in the making of useful articles, but also a growing skill and appreciation of good workmanship. It is hoped in the coming year to commence a general handicrafts class for those boys who shew no aptitude for joinery or boot repairing. One very pleasing feature of the school is the corporate spirit fostered by house competition, work and games. It is evident that the boys in the Junior Special Schools look forward to the transfer to the Senior School, and the parents shew less antagonism to their boys attending this school, such prejudice as exists being mainly due to the fact that the boys have to stay until they are sixteen years of age.

100. The hardship of this extended age, however, has been lessened by the appointment under the Juvenile Employment Committee of the special officer referred to above. To facilitate the work, a "leavers" conference is held in each school at the beginning of every term, when the scholars, who will leave at the end of that term, are individually seen, along with their parents,

by the Head Teacher, the Doctor, and the Employment Officer, the last-named obtaining, at this conference, facts as to the abilities and the types of employment suitable for them.

“Underlea.” 101. An interesting development in the Special Schools service will take place when the Underlea Day Open-Air School for delicate children is opened in March, 1930. This school, the first of its kind in Liverpool, the buildings of which comprise a large mansion house with open-air classrooms and a large rest shed, is situated near Aigburth Vale, in beautiful grounds with a southerly aspect, accommodation being provided for the education of 150 delicate children. The staff will consist of a head teacher and five assistant teachers, and a nurse, while a doctor will pay periodical visits to the school. The hours will be 8-30 to 4-30 in winter, and 8-30 to 6 in summer.

As a result of the long day in the open air, the three meals, the rest period and the open-air curriculum, it is hoped that many of the children will benefit sufficiently in health to be able to return to their ordinary schools at the end of one year's stay.

102. It is anticipated that another Day Open-Air School will be opened in 1930 at Eddesbury Lodge, a large house in grounds near West Derby Villge. Pressure on the elementary school accommodation has necessitated the handing over to the Elementary Education Sub-Committee at an early date of the site of the Whitefield Road Special School, and the transference of the physically defective children attending that school to Eddesbury Lodge, and of the mentally defective children to the proposed new school in Richmond Terrace, where the classrooms will be built on open-air principles.

103. The accompanying return shews the results of the examinations made by the Certifying Officers for Mentally and Physically Defective Children during the year:—



“Underlea” Day Open Air School.

Table 12.

	Referred as Physically Defective.	Referred as Mentally Defective.
Passed for M.D. Schools—Day	—	158
" " " " Residential... ..	—	5
Passed for P.D. Schools—Day	147	7
" " " " Residential... ..	71	28
To remain at ordinary schools	35	119
Postponed for further trial in ordinary school or for treatment	32	195
Unsuitable for any school, M.D.	—	32
" " " " P.D.	6	—
Miscellaneous (treatment, etc.)... ..	4	9
Total number of children examined	295	553

CASES NOTIFIED TO THE LANCASHIRE ASYLUMS BOARD DURING THE YEAR.

1. (i) Children incapable of receiving benefit or further benefit from instruction in a Special School :	
(a) Idiots	1
(b) Imbeciles	26
(c) Others	2
(ii) Children unable to be instructed in a Special School without detriment to the interest of the other children :	
(a) Moral defectives	—
(b) Others	5
2. Feeble-minded children notified on leaving Special Schools on or before attaining the age of 16 years	77
3. Children who, in addition to being mentally defective, were blind and deaf ...	1
TOTAL	112

In addition to the examination of new cases for the purpose of certification, the children attending the schools for the mentally defective and physically defective were examined as to their suitability for continuance in attendance, as required by the Act of 1899, the number of such examinations being 1,533. In

addition, 1,692 examinations were made by the School Medical Officers during the course of the year.

104. The following table shews (a) the accommodation, number on rolls, and the average attendance in the various grades of Special Schools provided by the Committee; and (b) the number of admissions and withdrawals during the year:—

(a) **Table 13.**

Schools.	Accommoda- tion.	No. on Rolls Dec., 1929.	Average Attendance. Dec., 1929.
Mentally Defective (day)	758	854	733·1
Physically Defective (day)	383	485	413·9
Physically Defective (residential) ...	66	72	72·0
Partially Blind	115	125	105·9
Deaf	200	167	149·9

(b)

	M.D.	P.D.	Deaf.	Partially Blind.
ADMISSIONS	463	339	17	23
WITHDRAWALS—				
Certificates cancelled	8	119	1	—
Attained 16 years	66	49	18	9
Excused attendance... ..	20	9	—	6
Left City	5	6	1	1
Died	3	2	—	—
Transferred to other schools ...	190	97	3	3
Excluded (T.B., etc.) or in Hospital	21	53	3	1
Notified to Mental Deficiency Authority—				
Under 16 years	26	1	—	—
Over 16 years	*42	—	—	—
	339	336	26	20

* Included in the 66 children who attained 16 years of age during the year.

105. The following table shews the work carried out in connection with the Special and Industrial Schools by the whole-time Dental Staff of the School Medical Sub-Comittee during the year: Dental Treatment.

Table 14.

					Industrial Schools.	Special Schools.	Total.
No. of sessions devoted to inspection	...	...	...	...	3	9	12
No. of sessions devoted to treatment	...	...	...	...	21	73	94
Total No. of sessions	...	...	...	...	24	82	106
No. of children inspected	...	...	...	...	367	1,144	1,511
No. of children requiring treatment	...	...	...	...	255 (69·4%)	867 (75·7%)	1,122 (74·2%)
No. of children treated	...	...	...	...	136	564	700
No. of attendances made for treatment	...	...	...	...	160	693	853
No. of teeth extracted	...	...	...	...	180	917	1,097
No. of teeth filled	...	...	...	...	50	273	323
No. of other operations	...	...	...	...	10	13	23
No. of administrations of general anæsthetic	...	...	...	...	102	474	576

106. The examination and treatment of the teeth of these children has now been carried out by the whole-time Dental Staff for the second complete year, and it is satisfactory to be able to report that the improvement in the teeth of these children, which was noted after the completion of one year's work, has been maintained. The proportion of children requiring treatment in the Industrial Schools has fallen from 79·2 per cent. when first examined in 1927 to 69·4 per cent. in 1929. The proportion in the Special Schools shews a similar, though smaller, decline, from 76·7 per cent. to 75·7 per cent. These proportions compare favourably with the figure for the children attending the public elementary schools, viz., 78·1 per cent., but do not adequately represent the real improvement that has taken place, the extent of decay and the consequent amount of remedial treatment necessary having been

found to be much less than in the preceding year. The average amount of dental work necessary per child was as follows, the figures for the public elementary schools also being quoted for the purpose of comparison :—

				Fillings per child.		Extractions per child.
Industrial Schools	...	...	...	·37	...	1·3
Special Schools	...	...	...	·5	...	1·6
Public Elementary Schools	...	...	...	·5	...	2·4

The smaller amount of treatment required per child in the case of Industrial and Special Schools is undoubtedly due to the higher proportion of acceptances received during the past few years, the percentage of acceptances at the Special Schools for the last year being 79 per cent., as compared with 38 per cent. for the Public Elementary Schools, so that a large majority of the children who required it have been treated in successive years.

107. Dental work for mentally deficient children is always of a very difficult and trying nature. These children, not possessing the power of concentration, experience difficulty in keeping the mouth open, and, moreover, as they salivate profusely, filling becomes a very difficult process, calling for the practice of unlimited patience.

108. The large proportion of acceptances obtained is largely due to the willing co-operation of the Head and other teachers in the schools concerned, who also have rendered every possible assistance when treatment has been carried out upon the school premises. The practice of treating all the children, as far as possible, in their own schools, instead of sending them to the School Clinics, has been continued, and is undoubtedly productive of very good results. Under these circumstances, the meals of the children requiring anæsthetics can be regulated, and the children themselves are happier and less apprehensive than if they have to go elsewhere for their treatment.

“Woolton
Vale.”

109. The Committee's Residential Country School at Woolton Vale for delicate children provides accommodation for 35 boys and

38 girls, and in 1929 the admissions were 119 and the discharges 132, the average duration of the stay of the children being six months.

During the year, 163 children in all were in attendance, and the following were the defects for which they were admitted:—

General debility ...	...	...	...	...	...	141
Healed T.B. cases	...	...	...	...	...	8
Rachitic deformities	...	...	...	...	...	6
Cardiac ...	...	...	...	...	...	5
Infantile paralysis	...	...	...	...	...	2
Talipes ...	...	...	...	...	...	1
						<hr/> 163

Of 132 children who left the school during the year, 97 were considered to be physically fit to attend ordinary schools or to take up employment. Some of these children had not attended school previously owing to ill-health, whilst many had only been able to attend very irregularly.

The provision of an additional open-air classroom enabled more of the education to be carried out under open-air conditions than was formerly possible. There were practically no cases of colds amongst the children during the year.

110. During the year, 74 visits were made by the children to Clinics or Hospitals for examination or treatment, whilst 93 children received dental treatment in the school. It is interesting to note that so large a proportion as 30 per cent. suffered from enuresis (diurnal or nocturnal, and in some cases, both), the habit being corrected in the majority before discharge. In 3 cases only no improvement took place; 2 of these, however, were resident for a short period only.

The balanced diet, regular life and healthy environment made a great improvement in practically all the children. Their

weight increased, and in many cases their appearance improved almost beyond recognition. Those who were apathetic and miserable looking when they were admitted became, before discharge, full of energy and vitality.

Of the children discharged, 42 gained up to 7 lbs. in weight, 71 gained between 7 and 14 lbs., 17 between 14 and 21 lbs., whilst 2 gained 22 and 26½ lbs. respectively.

111. The Head Mistress states that a comparison between the educational work done by the children on admission and when they were ready to be discharged shewed gratifying results, especially amongst children who had previously been backward. In addition to the usual elementary subjects, handwork, country dancing, and organised games, nature study and gardening were included in the curriculum. The nature study was found to be useful from the point of view of increasing the children's powers of observation.

A new interest this year was the formation of Scouts, Cubs, Girl Guides and Brownies, which was greatly appreciated by the children, the visits of the Scout Masters, and other officers who so kindly gave up their time to this work, being eagerly looked forward to.

“Torpenhow.” 112. The Committee continue to maintain 30 beds at the Torpenhow Open-Air School, Frankby, Wirral. During the year, 57 children were admitted and 57 discharged, the average duration of stay being six months. The Matron reports that the school has been conducted along lines similar to those of previous years, and that the new wooden open-air classrooms are a great improvement upon the former classrooms in the adapted greenhouse.

Many of the children on admission are very “faddy” and will not eat certain articles of diet provided for them, but they soon learn to overcome their prejudices. Certain of the parents enquire what kind of food the children have had whilst at Torpenhow, as they largely attribute their children's improvement in health to this factor.

The children as a whole did very well, gaining on an average $7\frac{1}{2}$ lbs. in weight.

The Matron states that she frequently gets enquiries from parents as to where the clothing and underwear worn by the children whilst in residence can be obtained, in order that the same kind of clothing may be worn when they return home.

During the summer holidays a re-union of ex-scholars was held, and 65 of these came to this re-union. Sports were held, and the day was very much enjoyed by both the visitors and the children resident. By the kindness of some of the local Hoylake and West Kirby residents who lent their motor cars, the children were taken for a motor drive to Rhyl during the summer, and this trip was greatly appreciated.

113. The cases after discharge have been kept under medical supervision by the School Medical Officers. There can be no question but that practically all the children, whatever their disability, benefited considerably whilst in residence there. In the case of 40 per cent. of the children who had left Torpenhow at least six months, it was ascertained that they had derived very material permanent benefit to their health, and another 45 per cent. had derived considerable benefit but not so marked as in the former, whilst 7.5 per cent., viewed from the point of permanent benefit, could only be considered to have derived slight benefit. In the case of the remainder, it was easy to account for their failure to maintain their improvement owing to their having contracted other diseases, e.g., scarlet fever, some time after returning to their homes.

114. In addition to the Special Schools and the accommodation provided at Torpenhow, the Committee maintain 3 beds at the West Kirby Convalescent Home, and 6 beds at the Liverpool School of Recovery (mainly heart cases), and they have secured the option of places at the Maghull Home for Epileptics. During the course of the year, 5 cases have been in residence at West Kirby, and 8 at the School of Recovery, whilst 3 cases have been maintained at the Home for Epileptics.

Other
Residential
Accommo-
dation.

Epileptics.

115. From Table III, Appendix A, under the heading Epileptics, it will be seen that the number of such cases known to the Department was 87, of which number 25 suffering from severe epilepsy and 8 from milder forms were at no school or institution.

HIGHER SCHOOLS.

116. The inspection of the pupils in the higher schools, which was commenced in 1920, has now reached its full development, and the pupils attending 18 of these schools are regularly inspected. The schools include two Girls' and two Boys' Voluntary Schools, in which the Managers have requested the Authority to arrange for the medical inspection. In addition to the above, the pupils in the Junior Section of the School of Art were this year included in the scheme of medical inspection for the first time.

117. The numbers of medical examinations made in the higher schools were as follows:—

6,286 routine cases;
6,429 re-inspection cases;
444 special cases.

The proportion of pupils requiring treatment found at the routine examinations was 24 per cent., defective vision, dental defects and minor deformities being the most common defects found. The pupils as a whole are better physically than those in the public elementary schools, and the more serious physical defects are much rarer.

118. Defective eyesight was recorded in 28 per cent. of the pupils, but three-quarters of these had already been treated for this defect. Of the remainder, the majority obtained treatment. Contrary to the experience in connection with the public elementary schools, very little difficulty is met with in the higher schools in securing the regular wearing of glasses.

There is evidence of much more attention being given to the teeth of these pupils than is the case of the children in the public elementary schools, and many of the pupils pay regular visits to their dentists.

With regard to the minor deformities referred to, these were, generally speaking, cases of flat feet or postural curvature of the spine. Arrangements are made for most of these cases to be given corrective exercises under the supervision of the gymnastic instructors to the schools.

119. After the parents have been notified of any defects requiring treatment, the Head Teachers keep in close touch with them, in order to urge treatment and to explain to them the best manner in which this can be obtained. The majority of the parents carry out the suggestions of the Medical Officers.

120. The Clinics provided for the elementary school children are available for the higher school pupils whose parents cannot afford to obtain treatment privately, and in the case of defective vision, arrangements have been made with certain Oculists to see pupils at a reduced fee if the parents cannot afford the usual fee.

121. The heights and weights of the routine cases at each school have been recorded by the gymnastic instructor, where there is such an official, and in the other cases by the School Medical Officers, and the following table shews the results in inches and pounds. The higher school pupils are taller and heavier than children of similar age in the elementary schools.

Table 15.

Age.	Boys.			GIRLS.		
	Number examined.	Height.	Weight.	Number examined.	Height.	Weight.
8	40	50·4	57·3	26	49·3	55·4
9	44	52·3	62·8	29	52·4	61·2
10	50	53·9	66·0	37	53·7	68·0
11	185	55·9	72·9	131	56·3	75·3
12	411	57·3	79·6	330	58·1	81·6
13	597	59·1	87·1	359	58·8	91·9
14	687	61·3	96·3	379	61·4	102·9
15	521	63·5	108·2	293	61·4	110·4

A statement of the defects discovered will be found in Table II of Appendix B at the end of this Report.

EMPLOYMENT OF CHILDREN.

122. The Bye-laws dealing with employment of children, which came into operation on the 1st January, 1924, are still in operation.

Table 16 gives a return of the number of school children employed, and the nature of the work undertaken.

Table 16.

Employment of School Children out of School Hours.

TRADE.	No. of cases on Register 31.12.28	No. of new cases added to Register during the year.			No. of cases with-drawn from Register during the year.			No. of cases remaining on the Register, 31.12.29.		
		Boys.	Girls.	TOTAL	Boys.	Girls.	TOTAL	Boys.	Girls.	TOTAL
Bakers and Confectioners...	58	76	3	79	72	3	75	59	3	62
Butchers	74	76	—	76	69	—	69	81	—	81
Bootmakers and Repairers	20	16	—	16	21	—	21	15	—	15
Chemists	5	3	—	3	2	1	3	5	—	5
Chandlers	74	84	1	85	76	1	77	81	1	82
Chipped Potato Vendors ...	3	2	—	2	2	—	2	3	—	3
Coal Merchants	6	7	—	7	8	—	8	5	—	5
Drapers, etc.	9	9	—	9	10	—	10	7	—	7
Dealers—General	13	34	—	34	38	2	40	7	—	7
Dealers—Firewood	9	6	2	8	6	1	7	8	2	10
Domestic Helpers	1	1	4	5	—	2	2	1	3	4
Fish and Poultry Dealers...	1	—	—	—	—	—	—	1	—	1
Grocers	48	53	1	54	76	—	76	25	1	26
Greengrocers	195	224	—	224	240	1	241	177	1	178
Ironmongers	1	—	—	—	—	—	—	1	—	1
Milk Dealers	408	354	24	378	372	31	403	343	40	383
Newsagents	677	749	33	782	696	38	734	689	36	725
Various	27	42	—	42	38	—	38	31	1	32
TOTALS	*1,629	1,736	68	1,804	1,726	80	1,806	1,539	88	1,627

*1,529 boys and 100 girls

123. From this table it will be seen that the main sources of employment are the delivery of milk and newspapers. As these employments, in the majority of cases, necessitate work before the commencement of school, the children undertaking such work have to be examined by the School Medical Officers, and certified as physically fit before a certificate is granted. For this purpose there were examined 1,044 children, and all but 7 were found to be fit. All children, whether working before the close of school hours or after, require to have employment cards, which are issued by the Education Committee, and these children are examined by the School Medical Officers at every visit to the schools. The employment, which, under the local Bye-laws, is limited to two hours on school days, and five hours on Saturdays and school holidays, seldom has any adverse effect upon their health, but the cases are kept under careful supervision, and occasionally it has been found advisable to withdraw the licence on health grounds.

124. With the object of seeing that the Bye-laws are complied with, two special officers, appointed by the Education Committee, are engaged in patrolling the streets between the hours of 7 a.m. and 9 a.m., and 5 p.m. and 9 p.m. daily, and on Saturdays and Sundays. The Attendance Officers also keep under observation the shops and the employed children in their districts, whilst the Police and Health Visitors co-operate in this work.

During the year 516 employers were warned for infringement of the provisions of the Bye-laws, and in 35 cases it was necessary to prosecute. In 28 cases fines were inflicted, and the remaining 7 cases were discharged with a caution.

125. A certain number of children of school age are employed in connection with theatrical performances, many of these children going on tour. These children require a licence from the Local Education Authority before they can be employed, and they must be examined every three months by the School Medical Officer of the area in which they happen to be. **Theatrical Licences.**

During the year 158 licences were issued by the Education Authority, and 193 examinations of the children made by the School Medical Officers; practically all the children were healthy.

The following action is taken in respect of every child who applies for a licence:—

A report is obtained from the Head Teacher as to the child's educational attainments, whilst the home circumstances are reported upon by a special visitor.

The child is medically examined by the School Medical Officer, and seen, together with the parents, by the Sub-Committee.

126. When a child appears at a place of entertainment in Liverpool, the place is visited, the licence examined, and the rooms used by the child are seen, and better accommodation insisted upon if necessary. In the case of a child coming from a distance, the place of residence is visited and approved, and a school place is secured.

Each Liverpool child who proceeds "on tour" is given a Record Book in which is to be entered the attendances at the different schools which the child attends, and there is a Scheme of Work which is drawn up by the Head Teacher of the school in Liverpool. The Record Books of the children "on tour" shew that they attend school regularly, and the remarks made by the various Head Teachers as to the progress of the children are generally good.

A notification of licensed children appearing in public performances in Liverpool is sent to the Chief Constable, and the Police Authorities co-operate in the supervision of the children, and report to the Director any irregularity.

The total number of children who appeared at the local theatres or picturedromes was 117, as against 76 in the preceding twelve months. All such children are visited by a special officer, who sees that the home conditions are suitable, ascertains that the licence is in order, and also pays visits to the theatres to see that the rules and orders of the Board of Education are complied with.

It will, therefore, be seen that as far as is possible, under the existing powers of the Authority, the health interests of every child are carefully guarded.

Members of the Committee visited certain theatres during the year, and saw the conditions under which the children worked.

127. The industrial situation in Liverpool and district has shewn some slight improvement during the year 1929, but there has been little diminution in the numbers of unemployed persons in the City. So far as juveniles are concerned, the average number of boys and girls who were registered as unemployed at the Juvenile Employment Bureau throughout the year was 3,070, which is slightly below the figure for the previous year. There is still considerable difficulty in finding employment for boys and girls on leaving the elementary schools at the age of 14 years. It is found that comparatively few of them have work to take up on withdrawing from school, and as a consequence a very high proportion of the school leavers apply at the Bureau for employment at the end of each school term. During the twelve months ended 31st July, 1929, 9,616 boys and girls (as compared with 9,856 for the preceding twelve months) were given advice and were registered for employment at the Bureau on leaving the public elementary schools. In addition, 9,481 young persons who had already been in work and had become unemployed were dealt with, the total number of applicants for the year being 19,097, an increase of 309 upon the number of registrants last year.

128. The number of juveniles who were placed in employment by the Juvenile Bureau during the year amounted to 7,124 (3,321 boys and 3,803 girls), being an increase of 74 on the previous year. Of these, 3,222 from the public elementary schools, 135 from the Central Schools and Classes, 231 from the Secondary Schools, and 22 from Junior Technical Schools were placed in their first situation.

129. An analysis of the "Placings" effected by the Bureau shews that of the 3,321 boys for whom posts were found, 611 went to clerical and commercial occupations, 204 as apprentices to

various trades, and 47 to other forms of business apprenticeships; 505 to works, warehouses, etc.; 136 to printing and stationery works (in many cases with a prospect of permanent employment); 91 to various Departments of the Corporation; 90 as Page boys in hotels, cafés, etc.; and 1,523 to such occupations as messengers, transport workers, etc., in which very many of them would have the opportunity of making some advancement. 97 boys were assisted to migrate to the Dominions, of whom all but 10 had received training under the Committee's Farm Training Scheme; 16 boys passed into the Royal Air Force as Aircraft Apprentices, and one boy into the Royal Navy as an artificer apprentice.

In the case of girls, 392 were found positions in clerical work, and 588 as shop assistants; 824 girls were placed in factories, and 202 in cafés and restaurants; 243 girls went to tailoring, and 332 were placed as workroom and shop messengers, with the probability of being absorbed into permanent work later; 851 girls took up domestic service, and the remainder of the placings, i.e., 31, were in a variety of smaller occupations.

130. The Junior Educational Centres, of which there are four being carried on in Liverpool, have been continued during the year, for the benefit of the boys and girls who are out of employment. Insured Juveniles (i.e., over 16 years of age), who are entitled to receive Unemployment Benefit, are required to attend a Centre on five half-days each week as one of the conditions of receiving Unemployment Benefit. On every possible occasion, vacancies notified to the Bureau are immediately made available for the juveniles at the Centres.

131. An interesting development of the work of the Juvenile Employment Committee should be mentioned, as it closely concerns the welfare of juveniles who are in employment. During the year, an After-Care Sub-Committee was formed, and a scheme for the "industrial supervision" of boys and girls brought into operation. Under this scheme juveniles, who have been placed in employment by the Bureau, are invited to attend an "Open Evening" at the Bureau, to meet members of the Sub-Committee and report as to their progress in their work. The scheme met with immediate success, and the results have so far been most encouraging, about

50 per cent. of the boys and girls to whom invitations have been issued, presenting themselves for interview each week. The meetings are of an informal character, the atmosphere is friendly and cheerful and light refreshments are provided. In the majority of cases it is found that the young people are happy in their work, and are satisfied with the posts found for them. Reasonable complaints are investigated, and in most cases the conditions have been improved or the trouble remedied; in a few cases it has been found desirable to move the young person to other employment. The "Open Evenings" provide the opportunity of impressing upon boys and girls the necessity of continuing their education, of forming habits of thrift, and of using their leisure in a rational manner. Very many boys and girls not belonging to clubs and other social organisations, have been induced to join one, so that their recreative hours may be wisely spent.

132. Towards the end of 1928 the Juvenile Employment Committee built and equipped a Hostel on the Health Committee's Farm at Burscough for the accommodation of 40 youths in connection with a scheme for three months' farm training of would-be emigrants to Canada, Australia, or New Zealand. During the day time practical training is given in farming, whilst in the evenings instruction is given in woodwork, cobbling, cooking, clothes mending, and personal hygiene.

Indoor and outdoor recreation is also provided. Up to the end of 1929, 105 youths had completed their training and gone overseas.

133. With regard to the suitability of the various forms of employment for the many applicants who are dealt with at the Juvenile Bureau, it should be mentioned that all the medical records and notes of the School Medical Officers are available in the Medical Department for reference and use by the Bureau, and the School Medical Staff are always ready, where necessary, to undertake special examinations at the request of the Bureau.

A. A. MUSSEN,

Medical Officer to the Education Authority.

APPENDIX A.**ELEMENTARY SCHOOLS.****TABLE I.****RETURN OF MEDICAL INSPECTIONS.****A.—Routine Medical Inspections.**

NUMBER OF CODE GROUP INSPECTIONS :—

Entrants	...	...	...	...	...	...	...	...	15,547
Intermediates	...	...	...	...	...	...	...	...	15,055
Leavers	...	...	...	...	...	...	...	...	11,664
TOTAL									<u>42,266</u>

NUMBER OF OTHER ROUTINE INSPECTIONS :—

Public Elementary Schools	...	...	...	...	...	...	...	151
Special Schools	...	...	...	...	...	...	...	473

B.—Other Inspections.

i. PUBLIC ELEMENTARY SCHOOLS :—

Number of Special Inspections	...	...	...	...	...	*11,526
Number of Re-inspections	...	...	...	...	...	48,284
TOTAL						<u>59,810</u>

ii. SPECIAL SCHOOLS :—

Number of Special Inspections	...	...	...	...	...	39
Number of Re-inspections	...	...	...	...	...	1,180
TOTAL						<u>1,219</u>

* Not including children examined at Minor Ailments Clinics.

ELEMENTARY SCHOOLS.
TABLE II.

A.—Return of Defects found by Medical Inspection in the Year ended
31st December, 1929.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	Number of Defects.		Number of Defects.	
	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.
(1)	(2)	(3)	(4)	(5)
MALNUTRITION	134	194	40	38
UNCLEANLINESS	See Table IV, Group V.			
SKIN—				
Ringworm—				
Scalp	23	—	186	—
*Body	12	—	13	—
Scabies	10	—	239	—
*Impetigo	62	—	78	—
*Other Diseases (Non-Tuberculous)...	167	149	73	48
EYE—				
*Blepharitis	123	125	82	59
*Conjunctivitis	61	22	60	7
*Keratitis	14	—	13	—
*Corneal Ulcer... ..	9	—	19	—
Corneal Opacities	—	7	—	—
Defective Vision (excluding Squint)	2,071	2,055	2,600	603
Squint... ..	845	997	1,078	172
Other Conditions	28	106	44	22
EAR—				
Defective Hearing	76	170	36	47
Otitis Media	219	430	83	83
Other Ear Diseases	86	30	32	9
NOSE AND THROAT—				
Enlarged Tonsils only	562	2,429	322	358
Adenoids only	109	171	113	43
Enlarged Tonsils and Adenoids	141	179	268	39
Other Conditions	367	430	123	93
ENLARGED CERVICAL GLANDS (Non-Tuberculous)	33	508	18	78
DEFECTIVE SPEECH	76	284	44	115
‡TEETH (Dental Diseases)	1,515	1,343	276	188

* Exclusive of children examined at the Minor Ailments Clinics.

‡ Cases examined by the School Medical Officers.

ELEMENTARY SCHOOLS.

TABLE II.—Continued.

DEFECT OR DISEASE. (1)	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	Number of Defects.		Number of Defects.	
	Requiring Treat- ment.	Requiring to be kept under observa- tion, but not requiring Treat- ment.	Requiring Treat- ment.	Requiring to be kept under observa- tion, but not requiring Treat- ment.
	(2)	(3)	(4)	(5)
HEART AND CIRCULATION—				
Heart Disease—				
Organic	18	204	19	62
Functional	31	999	10	186
Anaemia	407	402	185	93
LUNGS—				
Bronchitis	318	999	135	215
Other Non-Tuberculous Diseases ...	40	366	19	120
§TUBERCULOSIS—				
Pulmonary—				
Definite	—	5	30	18
Suspected	6	1	20	—
Non-Pulmonary—				
Glands	6	115	20	27
Spine	—	9	1	2
Hip	—	4	6	4
Other Bones and Joints ...	—	17	6	6
Skin	3	9	6	1
Other Forms	5	52	17	21
NERVOUS SYSTEM—				
Epilepsy	13	49	23	12
Chorea... ..	72	—	105	—
Other Conditions	50	106	40	24
DEFORMITIES—				
Rickets	46	129	31	24
Spinal Curvature	22	14	5	4
Other Forms	60	132	19	26
DEBILITY	703	759	501	222
OTHER DEFECTS AND DISEASES ...	592	1,225	394	450

§ Under the heading "Tuberculosis" most of the cases in columns (3) and (5) are cases in which the disease is quiescent but is not yet considered cured.

ELEMENTARY SCHOOLS.**TABLE II.—Continued.**

B.—Number of Individual Children found at Routine Medical Inspection to require treatment (excluding Uncleanliness and Dental Diseases).

Group. (1)	NUMBER OF CHILDREN		Percentage of children requiring treatment. (4)
	Inspected. (2)	Requiring treatment. (3)	
CODE GROUPS :			
Entrants 	15,547	2,551	16·5
Intermediates 	15,055	2,730	17·4
Leavers 	11,664	1,974	17·2
TOTAL (Code Groups) 	42,266	7,255	17·2
Other routine inspections 	151	35	23·1

ELEMENTARY SCHOOLS.

TABLE III.

Numerical Return of all Exceptional Children in the Area
at the end of 1929.

			Boys.	Girls.	Total.
BLIND (including partially blind).	(i) Suitable for training in a School or Class for the totally blind.	Attending Certified Schools or Classes for the Blind Attending Public Elementary Schools ... At other Institutions At no School or Institution	21 — — 2*	14 — — 3†	35 — — 5
	(ii) Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind Attending Public Elementary Schools ... At other Institutions At no School or Institution	60 25 — 1	64 36 1 1	124 61 1 2
DEAF (including deaf and dumb and partially deaf).	(i) Suitable for training in a School or Class for the totally deaf or deaf and dumb.	Attending Certified Schools or Classes for the Deaf Attending Public Elementary Schools ... At other Institutions At no School or Institution	71 — — 1	46 1 — 2	117 1 — 3
	(ii) Suitable for training in a School or Class for the partially deaf.	Attending Certified Schools or Classes for the Deaf Attending Public Elementary Schools ... At other Institutions At no School or Institution	— 37 — —	— 41 — —	— 78 — —
MENTALLY DEFECTIVE	Feeble-minded (cases not notifiable to the Local Control Authority.)	Attending Certified Schools for Mentally Defective Children Attending Public Elementary Schools ... At other Institutions At no School or Institution	502 42 20 29	371 27 15 22	873 69‡ 35‡ 51‡
	Suffering from severe epilepsy	Attending Certified Special Schools for Epileptics In Institutions other than Certified Special Schools Attending Public Elementary Schools ... At no School or Institution	5 6 — 16	— 3 — 9	5 9 — 25
EPILEPTICS.	Suffering from epilepsy which is not severe.	Attending Day Special Schools Attending Public Elementary Schools ... At no School or Institution	8 7 6	12 13 2	20 20 8

ELEMENTARY SCHOOLS.
TABLE III.—Continued.

			Boys.	Girls.	Total.
PHYSICALLY DEFECTIVE.	Infectious pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	3	8	11
		At other Institutions	1	—	1
		At no School or Institution	1	2	3
	Non-infectious but active pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	39	55	94
		At Certified Residential Open-Air Schools...	3	—	3
		At Certified Day Special Schools	1	1	2
		At Public Elementary Schools	41	45	86
		At other Institutions	{ 37 (32)	41 (31)	78 (63)
		At no School or Institution	70	64	134
	Delicate Children (e.g. pre- or latent tuberculosis, malnutrition, debility, anaemia, etc.)	At Certified Residential Open-Air Schools ...	{ 49 (—)	62 (1)	111 (1)
		At Certified Day Special Schools	47	43	90
		At Public Elementary Schools	362	298	660
		At other Institutions	{ 25 (10)	14 (4)	39 (14)
		At no School or Institution	{ 34 (1)	42 (1)	76 (2)
	Active non-pulmonary tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board...	{ 48 (2)	37 (1)	85 (3)
		At Certified Day Special Schools	1	2	3
		At Public Elementary Schools	8	10	18
		At other Institutions	{ 31 (27)	12 (11)	43 (38)
		At no School or Institution	{ 15 (1)	22 (—)	37 (1)
	Crippled Children (other than those with active tuberculous diseases), e.g., children suffering from paralysis, etc., and including those with severe heart disease.	At Certified Hospital Schools	{ 11 (5)	21 (6)	32 (11)
		At Certified Residential Open-Air Schools ...	—	—	—
		At Certified Day Cripple Schools	206	150	356
		At Public Elementary Schools	33	19	52
		At other Institutions	{ 27 (11)	27 (13)	54 (24)
		At no School or Institution	{ 35 (1)	61 (1)	96 (2)

* Receiving Private Tuition.

† One awaiting place in Certified School and two unsuitable for institutional training, M.D. as well as blind.

‡ A number of these cases have not yet been examined by the Certifying Medical Officer.

The numbers shewn within brackets refer to cases diagnosed by the Staffs of certain Institutions but not seen subsequently by the Authority's Medical Staff. These numbers are included in the totals.

ELEMENTARY SCHOOLS.

TABLE IV.

Return of Defects treated during the Year ended 31st December, 1929.

TREATMENT TABLE.

Group 1.—Minor Ailments (excluding Uncleanliness, for which see Group V).

Disease or Defect. (1)	*Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	TOTAL. (4)
SKIN—			
Ringworm—Scalp	107	205	312
Ringworm—Body	246	5	251
Scabies	9	315	324
Impetigo... ..	2,985	58	3,043
Other Skin disease	1,408	158	1,566
MINOR EYE DEFECTS— (External and other, but excluding cases falling in Group II)... ..	2,898	214	3,112
MINOR EAR DEFECTS	1,958	117	2,075
MISCELLANEOUS— (e.g. minor injuries, bruises, sores, chilblains, etc.)	13,160	156	13,316
TOTAL	22,771	1,228	23,999

* The numbers in Group I of this Table refer almost wholly to children treated at the Committee's Clinics. No reliable information is obtainable as to the number of cases treated elsewhere.

ELEMENTARY SCHOOLS.

Group II.—Defective Vision and Squint (excluding Minor Eye Defects
treated as Minor Ailments, Group I).

Defect or Disease. (1)	NUMBER OF DEFECTS DEALT WITH.			
	Under the Authority's Scheme. (2)	Submitted to refraction by private practitioner or at hospital, apart from Authority's Scheme. (3)	Other- wise. (4)	TOTAL. (5)
ERRORS OF REFRACTION (including Squint)				
New Cases 	3,228	156	7	3,391
Re-examinations 	2,359	24	—	2,383
TOTAL	5,587	180	7	5,774
Other Defect or Disease of the eyes (excluding those recorded in Group I)	29	12	—	41
TOTAL	5,616	192	7	5,815

Total number of Children for whom Spectacles were prescribed :

(a) Under Authority's Scheme 	5,026
(b) Otherwise 	180

Total number of Children who obtained or received spectacles :

(a) Under the Authority's Scheme 	5,006
(b) Otherwise 	180

ELEMENTARY SCHOOLS.

Group III.—Treatment of Defects of Nose and Throat

	NUMBER OF DEFECTS.				
	RECEIVED OPERATIVE TREATMENT.			Received other forms of treatment.	Total number treated.
	Under the Authority's Scheme, in Clinic or Hospital.	By private practitioner or Hospital, apart from the Authority's Scheme.	TOTAL.		
	(1)	(2)	(3)	(4)	(5)
Tonsils and Adenoids ...	1,357	67	1,424	23	1,447
Mouth Breathing ...	—	—	—	592	592
TOTAL ...	1,357	67	1,424	615	2,039

Group IV.—Dental Defects.

(1) Number of Children

(a) Inspected :—

		Aged							
Routine Age Groups	...	{	5	...	—	}	TOTAL	54,322
			6	...	7,159				
			7	...	8,091				
			8	...	7,908				
			9	...	8,120				
			10	...	5,871				
			11	...	5,362				
			12	...	5,334				
			13	...	5,758				
			14	...	719				
Specials	1,467	
GRAND TOTAL		55,789				

(b) Found to require treatment ... 43,526

(c) Actually treated ... 15,570

(d) Re-treated during the year as the result of pericdical examination 7,164

(2) Half-days devoted to { Inspection ... 360 }
 { Treatment ...1773 } TOTAL ... 2,133

ELEMENTARY SCHOOLS.

(3) Attendances made by children for treatment	...	...	...	...	28.657
(4) Fillings	$\left\{ \begin{array}{l} \text{Permanent Teeth ... 8,258} \\ \text{Temporary Teeth ... —} \end{array} \right\}$		...	...	TOTAL ... 8,258
(5) Extractions	$\left\{ \begin{array}{l} \text{Permanent Teeth 6,313} \\ \text{Temporary Teeth 31,055} \end{array} \right\}$		...	...	TOTAL ... 37.368
(6) Administrations of general anæsthetics for extractions	...	...	...	...	15.588
(7) Other operations	$\left\{ \begin{array}{l} \text{Permanent Teeth ... 769} \\ \text{Temporary Teeth ... 1} \end{array} \right\}$		...	TOTAL	... 770

Group V.—Uncleanliness and Verminous Conditions.

(1) Average number of visits per school made during the year by the School Nurses	...	...	...	...	...	...	...	...	...	44.1
(2) Total number of examinations of children in the Schools by School Nurses	...	...	...	...	...	...	...	...	...	186,074
(3) Number of individual children found unclean	...	...	...	...	...	...	...	...	...	11,666
(4) Number of children cleansed under arrangements made by the Local Education Authority, viz. :—										
Under Statutory Notices	...	...	...	...	...	...	...	...	...	812
*Voluntarily	...	...	...	...	...	...	...	...	...	14,727
(5) Number of cases in which legal proceedings were taken :—										
(a) Under the Education Act, 1921	...	...	...	...	...	...	...	...	...	Nil.
(b) Under School Attendance Byelaws	...	...	...	...	...	...	...	...	...	Nil.
(c) Under Liverpool Corporation Act, 1921 :										
Informations	...	...	...	...	...	...	...	...	...	15
Convictions ..	...	...	...	...	...	...	...	...	...	3
Discharged with caution	...	...	...	...	...	...	...	...	...	9
Withdrawn	...	...	...	...	...	...	...	...	...	3

* In addition to this number, which represents more than one attendance of certain children, and not individual children, 4,807 other children also attended the Cleansing Station, for Spray or Slipper baths, on their own initiative.

APPENDIX B.

HIGHER SCHOOLS.

TABLE I.—RETURN OF MEDICAL INSPECTIONS.

A.—Routine Medical Inspections.

Age.	8	9	10	11	12	13	14	15	16	17	Grand Total.
Boys	56	71	64	230	622	866	902	705	335	141	3,992
Girls	34	32	44	153	401	433	454	370	227	146	2,294
Total	90	103	108	383	1,023	1,299	1,356	1,075	562	287	6,286

B.—Other Inspections.

Number of Special Inspections	...	...	...	...	...	...	...	...	444
Number of Re-inspections	...	...	...	...	...	...	...	...	6,429
									—
TOTAL	...	...	...	...	...	...	...	...	6,873
									—

HIGHER SCHOOLS.

TABLE II.—A.

Return of Defects found by Medical Inspection in the Year
ended 31st December, 1929.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	Number of Defects.		Number of Defects.	
	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.
(1)	(2)	(3)	(4)	(5)
MALNUTRITION	4	40	2	5
SKIN—				
Ringworm—				
Scalp	—	—	—	—
Body	—	—	—	—
Scabies	1	—	—	—
Impetigo	4	—	—	—
Other Diseases (Non-Tuberculous) ..	14	23	9	—
EYE—				
Blepharitis	8	7	2	—
Conjunctivitis	3	3	1	—
Keratitis	—	—	—	—
Corneal Ulcers	—	—	—	—
Corneal Opacities	—	—	—	—
Defective Vision (excluding Squint)	428	1,263	225	51
Squint	20	50	5	1
Other Conditions	2	9	1	1
EAR—				
Defective Hearing	23	79	1	6
Otitis Media	16	69	—	8
Other Ear Diseases	20	11	1	—
NOSE AND THROAT—				
Enlarged Tonsils only	31	340	1	21
Adenoids only	1	10	—	1
Enlarged Tonsils and Adenoids ...	2	5	1	—
Other Conditions	38	84	2	12
ENLARGED CERVICAL GLANDS (Non-Tuberculous)	2	64	—	—
DEFECTIVE SPEECH	12	56	—	4

HIGHER SCHOOLS.

TABLE II.—Continued.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	Number of Defects.		Number of Defects.	
	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.
(1)	(2)	(3)	(4)	(5)
TEETH—				
Dental Diseases	437	55	30	7
HEART AND CIRCULATION—				
Heart Disease—				
Organic	—	53	—	1
Functional	3	267	—	25
Anaemia	48	106	1	12
LUNGS—				
Bronchitis	9	87	1	6
Other Non-Tuberculous Diseases ...	—	—	—	—
*TUBERCULOSIS—				
Pulmonary—				
Definite	—	—	—	—
Suspected	—	—	—	—
Non-Pulmonary—				
Glands	—	7	—	—
Spine	—	2	—	1
Hip	—	2	—	—
Other Bones and Joints	—	2	—	—
Skin	—	—	—	—
Other Forms	—	6	—	—
NERVOUS SYSTEM—				
Epilepsy	—	—	—	—
Chorea... ..	4	—	2	—
Other Conditions	4	24	—	2
DEFORMITIES—				
Rickets	1	8	—	—
Spinal Curvature	25	42	3	3
Other Forms	61	105	2	10
Flat Feet	133	179	7	16
OTHER DEFECTS AND DISEASES ...	109	378	26	43

* Under the heading of Tuberculosis most of the cases in column (3) are cases in which the disease is quiescent but not yet considered cured.

HIGHER SCHOOLS.

B.—Number of Individual Children Found at Routine Medical Inspection to Require Treatment (excluding Uncleanliness).

Group. (1)	NUMBER OF CHILDREN.		Percentage of children requiring treatment. (4)
	Inspected. (2)	Requiring treatment. (3)	
CODE GROUPS :			
Total	6,286	1,509	24·0

TABLE IV.

Return of Defects treated during the Year ended 31st December, 1929.

TREATMENT TABLE.

Group I.—Minor Ailments (excluding Uncleanliness).

Disease or Defect. (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	TOTAL. (4)
SKIN—			
Ringworm—Scalp	—	—	—
Ringworm—Body	—	—	—
Soabies	—	1	1
Impetigo... ..	—	4	4
Other Skin Diseases	—	28	28
MINOR EYE DEFECTS (External and others, but excluding cases falling in Group II)	—	19	19
MINOR EAR DEFECTS	2	43	45
MISCELLANEOUS (e.g. minor injuries, bruises, sores, chilblains, etc.)	—	18	18
TOTAL	2	113	115

HICHER SCHOOLS.

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I).

DISEASE OR DEFECT		NUMBER OF DEFECTS DEALT WITH			
		Under the Authority's Scheme	Submitted to refraction by private practitioner or at Hospital, apart from the Authority's Scheme	Other-wise	Total
(1)		(2)	(3)	(4)	(5)
Errors of Refraction (including Squint).	New Cases	105	127	56	288
	Re-examination Cases	154	48	11	213
Other Defect or Disease of the eyes (excluding those recorded in Group I).....		—	—	—	—
TOTAL		259	175	67	501

Total Number of children for whom spectacles were prescribed :—

(a) Under the Authority's Scheme	...	...	...	...	...	234
(b) Otherwise	...	...	...	...	...	240

Total Number of children who obtained or received spectacles :—

(a) Under the Authority's Scheme	...	...	...	...	...	234
(b) Otherwise	...	...	...	...	...	240

HIGHER SCHOOLS.

Group III.—Treatment of Defects of Nose and Throat.

	RECEIVED OPERATIVE TREATMENT			Received other Forms of Treatment	Total number treated
	Under the Authority's Scheme, in Clinic or Hospital (1)	By Private Practitioner or Hospital, apart from the Authority's Scheme (2)	Total (3)		
Enlarged tonsils and adenoids.....	6	26	32	1	33
Mouth Breathing	—	—	—	58	58
TOTAL	6	26	32	59	91

APPENDIX C.

LIVERPOOL EDUCATION COMMITTEE.

*REPORT BY THE INSPECTOR OF PHYSICAL
TRAINING FOR THE YEAR 1929.*

The physical education of the 136,000 elementary school children of Liverpool has been regular and progressive throughout the year 1929. In addition to the lessons given in school halls and playgrounds based on the Syllabus of the Board of Education, the majority of senior departments have included **organised games** and **athletic training** in public parks and playing fields, and **swimming instruction** at the public or school baths, in the school time-tables.

Classes of instruction for teachers in physical exercises, and games for playground and playing field, were conducted after school hours, and the response of the teachers was exceptionally keen. These classes of instruction serve as "refresher" courses; they are the means of promulgating fresh ideas in method and organisation, and of providing the teachers with a stimulus to maintain their work in the schools at an interesting pitch.

The magnificent work carried out by the teachers, with the co-operation of the civic authorities, **out of school hours**, has included the organisation of inter-house, inter-school and inter-city contests in football, cricket, baseball, rounders, netball and hockey; competitions in athletics, swimming, life-saving and dancing; and school holiday camping.

Free Transport of Elementary School Children from Congested Areas.

A considerable proportion of the elementary schools of Liverpool are situated in congested areas, and these schools are far removed from playing fields and public parks. Since 1923 the Elementary Schools Management Committee has approved expenditure on tram fares for selected schools to send children once a week to distant playing fields. The amount expended during the year 1929 on this scheme was £595, and 83 school departments were included.

The visits to playing fields take place during afternoons, and the children travel on public trams at half fare with tickets supplied by the Education Committee. Each department included is entitled to send 50 children once a week, in accordance with definite time-tables, and under the care of a teacher.

Public Swimming Baths.

At eleven establishments throughout the City, the public swimming baths have been used by the elementary school children during school hours. The Baths Committee admit the children free of charge, and the Education Committee pay a nominal sum of £500 to the Baths Committee to defray the expenses of washing towels, etc.

The children attend the baths under the supervision of teachers at stated times, according to time-tables compiled at conferences between the Inspector of Physical Training and Head Teachers concerned. A regulation that not more than 40 children go to the baths in charge of one teacher ensures safety and discipline, and makes it possible for the teacher to devote time to definite instruction and correction.

In order to investigate the progress of swimming instruction in the schools, Head Teachers were asked to state the number of scholars who could swim 25 yards at the end of October, 1929. The results of the investigation shew that 6,380 boys and 4,120 girls are swimmers, a total of 10,500. As there are about 42,500 children over the age of eleven in the schools, it is obvious that **more accommodation and further progress in swimming instruction is still necessary.**

School Swimming Baths.

The use of 14 school swimming baths throughout the Summer season has been much appreciated by the scholars and teachers, and has helped considerably in augmenting the facilities granted at the public baths.

Private Slipper and Spray Baths.

Permission is granted by the Baths Committee for a limited number of the poorer children to have free use of the slipper and spray baths in seven public departments between the hours of 4 and 5 p.m. on school days in winter months.

Only four schools have spray baths on the premises, viz., Harrison Jones, St. James', St. Augustine's and Everton Terrace Council Schools; these have been regularly used throughout the year.

Public Baths Attendances, 1929.

Name of Bath.	ATTENDANCES		ATTENDANCES		ATTENDANCES	
	SWIMMING PLUNGES		SWIMMING PLUNGES		SLIPPER AND SPRAY BATHS.	
	Summer Months, 1929. Summer.		Winter Months, 1929. Winter. Jan.Feb.Mar.Nov.Dec.		Winter Months, 1929. Winter. Jan.Feb.Mar Nov.Dec.	
	Boys.	GIRLS.	Boys.	GIRLS.	Boys.	GIRLS.
Cornwallis Street	15,573	12,149	—	—	598	—
Margaret Street	48,587	17,453	18,404	1,901	577	638
Westminster Rd.	38,991	18,797	12,164	3,851	396	753
Lister Drive	23,991	15,228	—	—	—	—
Picton Road	14,575	5,684	—	—	700	167
Speke Road	23,712	14,484	12,091	3,234	—	—
Queen's Drive ...	19,912	15,327	—	—	—	—
Stebble Street	37,617	17,179	13,441	1,609	1,123	1,116
Lodge Lane	24,971	16,078	6,896	2,025	541	544
Burroughs Gdns.	24,000	10,754	—	—	936	805
Woolton	1,426	1,004	—	—	172	258
Netherfield Road	—	—	—	—	—	410
Minshull Street ...	—	—	—	—	483	696
Beacon Street ...	—	—	—	—	2,542	659
TOTALS in 1929	273,355	144,137	62,996	12,620	8,068	6,046
	417,492		75,616		14,114	

Attendances, School Plunge Baths, 1929.

Name of School Bath.	Size of Bath.	No. of weeks Bath was in use in 1929.	Total No. of Scholars' Attendances at Bath.		No. of Swimmers, October, 1929 (able to swim at least 25 yds.)	
			Boys.	Girls.	Boys.	Girls.
Anfield Road	51 ft. × 24 ft.	21	8,129	6,745	96	82
Beaufort Street	34 ft. × 16 ft.	20	8,659	4,219	125	109
Birehfield Road ...	58 ft. × 20 ft.	22	8,896	8,808	117	121
Boaler Street	45 ft. × 20 ft.	22	5,976	3,048	85	60
Brae Street.....	24 ft. × 14 ft.	12	580	1,050	56	44
Daisy Street	19 ft. × 15¾ ft.	21	1,672	1,174	52	30
Breckfield-Granton Road (Girls)	40 ft. × 15 ft.	18	—	1,868	—	46
Harrington	24 ft. × 13½ ft.	18	1,620	2,916	33	32
Heyworth Street ...	30 ft. × 18 ft.	20	4,517	2,947	89	54
Lawrence Road ...	54 ft. × 24 ft.	22	7,608	7,979	150	160
Longmoor Lane.....	50 ft. × 20 ft.	21	5,250	6,720	62	60
Rathbone	21½ ft. × 15½ ft.	19	5,700	2,850	40	15
St. Michael's Hamlet	22½ ft. × 17½ ft.	18	1,440	1,620	25	30
Sefton Park	40 ft. × 20 ft.	22	2,904	3,344	80	70
			62,951	55,288		
			118,239			

(Total for year 1928 :—92,084).

The following 17 schools were also accommodated at School Baths:—All Saints' R.C., Holy Trinity C.E. (Walton), Butler Street, Sheil Road, St. Mary's C.E. (Edge Hill), Webster Road, Earle Road, Rice Lane, Barlow's Lane, St. John's C.E. (Walton), S. Charles' R.C., Sudley Road, Pinehurst Avenue, Loraine Street, St. Hugh's R.C., Sacred Heart R.C., and St. Jude's C.E.

The year's Total Attendances at Swimming Plunges :—

PUBLIC BATHS :—				Boys.	Girls.	TOTAL.
Winter Months ...	...	...	...	62,996	12,620	75,616
Summer Months ...	...	...	...	273,355	144,137	417,492
SCHOOL BATHS :—						
Summer Months ...	...	...	...	62,951	55,288	118,239
				TOTAL	year	...
						611,347

(Total for year 1928 : 572,130)

Evening Play Centres.

The premises of 13 schools were used regularly throughout the Sessions (October to December and January to March) on Tuesday and Thursday evenings, from 5.30 to 7.30 p.m. The play centres are not continued in the summer months of April to September. Experience gained in organising play centre activities in Liverpool during summer months for three years, 1918-1921, showed that children are not attracted during fine summer evenings to attend school premises, even if selected paid supervisors are provided.

The average attendances and number of paid workers are here given :—

Name of Centre.	Average Attendance	Number of staff.			Area of situation.
Addison Street ... Mixed	413	1 superintendent, 8 assistants			Scotland Rd.
Banks Road ... Mixed	465	1	„	9 „	Garston.
Harrington ... Mixed	637	1	„	10 „	South Docks
Harrison Jones ... Mixed	438	1	„	8 „	Edge Hill
Holy Cross R.C. ... Girls	254	1	„	6 „	Central.
Netherfield Road ... Mixed	451	1	„	8 „	Netherfield.
Penrhyn Street ... Mixed	475	1	„	9 „	Scotland Rd.
S. Augustine's ... Boys	420	1	„	8 „	Islington.
S. Augustine's ... Girls	383	1	„	8 „	Islington.
S. James' Mixed	422	1	„	8 „	Central.
S. Paul's C.E. ... Mixed	422	1	„	8 „	Toxteth
S. Sylvester's R.C. ... Mixed	561	1	„	9 „	Scotland Rd.
Wellington Road ... Mixed	401	1	„	8 „	Toxteth
TOTAL AVERAGE ATTENDANCE	5,742				

The regular attendance, mainly consisting of the poorer children, who would otherwise spend their spare time in the streets or on doorsteps, is gratifying.

The regional distribution of the 13 play centres in the most congested areas of the City has been carefully considered, and no

change is recommended, but a suggestion to open an additional centre in the new housing area of Norris Green has been approved.

In dealing with the appointments of Superintendents, the policy of the Committee has been established that, after serving for three sessions, a Superintendent shall automatically retire and leave a vacancy for a fresh appointment. This policy has been successful, and not only ensures the introduction of fresh schemes and ideas, but also gives the Committee the advantage of giving a greater number of assistant teachers the opportunity of gaining experience in organisation and control.

Games Supervision in Public Parks during Summer Holidays, 1929.

During the five weeks of the Elementary Schools Holiday the Elementary Schools Management Sub-Committee, in co-operation with the Parks and Gardens Committee, carried out their scheme, for the tenth successive year, whereby definite organised games and activities were provided in the larger public parks for children on holiday.

The Review Field at Sefton Park was not available owing to the Eisteddfodd activities, and the Walton Hall Avenue Recreation Ground was used for the first time. This Recreation Ground is situated within walking distance of the new housing districts in the "Florence Melly" area, and the attendance of children fully justified its inclusion.

Six Parks, viz., **Princes Park, Stanley Park, Sheil Park, Wavertree Playground, Garston Recreation Ground and Walton Hall Avenue Recreation Ground**, were each in charge of three supervisors—two men and one woman—who were on duty from 1.0 to 5.0 p.m. daily, except Saturdays, Sundays and Bank Holidays.

Games apparatus was supplied by the Committee, as in previous years, and stored and issued from the lock-up huts provided for that purpose. The weather was generally fine, and the children were eager for their games, even during threatening weather. The attendance of children varied in the different Parks, and the

estimated average daily attendance of children was 1,350 boys and 600 girls. This only includes the children who were using the games' apparatus. Others, of course, were busy with the swings and paddling pools. The attendance was considered to be slightly lower than in previous years, and the organisers state that this was due to the number of scholars who took advantage of the cheap fares to distant Parks. Congestion in the more central Parks was certainly less noticeable than in previous years.

Inter-Park cricket matches were played, and cricket and rounder teams were also formed representing schools or streets. The chief weekly event in each Park was the Sports Meeting, for which the scheme provides a weekly sum of 5s. per Park for the purchase of small prizes.

No serious accidents occurred, and the honesty of the children in returning bats, balls, etc., to the storage huts from distant playing pitches was commendable.

The Inspector of Physical Training reports that, although the scheme caters only for a comparatively small proportion of the huge elementary school population of Liverpool which lacks opportunities to spend holidays by the seaside or in the country air, it is certainly well worth the expense entailed.

Elementary School Holiday Camp, 1929.

Since the summer of 1920, the Elementary Schools Management Sub-Committee has given approval for the payment of grants-in-aid to assist teachers in taking poor school children to Camps for a portion of the Summer Holiday. The amounts expended to date are as follows:—

Year.	Total Grant from L.E.A.			No. of Camps.
	£	s.	d.	
1920	348	10	0	22
1921	201	0	0	10
1922	71	0	0	4
1923	192	0	0	10
1924	483	10	0	24
1925	588	0	0	27
1926	697	10	0	31
1927	1,000	0	0	42
1928	1,027	0	0	50
1929	1,470	7	0	69

In preparing the scheme for the Summer Holidays, 1929, all elementary schools in Liverpool were circularised inviting applications for inclusion, and 69 schools sent in applications, which were favourably considered and approved by the Elementary Schools Management Sub-Committee.

Arrangements were made for the majority of Camps to be visited by a representative of the Elementary Schools Management Sub-Committee, and the teachers and organisers appreciated the kindly interest of Councillors F. B. Brown, A. Hargreaves, P. Moorhead, A. Griffin, Mr. C. H. Barker and Mr. J. Kay, in recording visits of inspection. Other visits were made by the Deputy Director and the Committee's Inspectors.

The Inspector of Physical Training has received and filed reports received from the organisers and from the official visitors. The Camps were generally reported upon as being well organised; the sanitary arrangements sufficient; the food good; and the various activities health giving. Excellent photographs are available for inspection.

It is interesting to report that the total expenses of all Camps was £3,250; this shows that the Committee's policy of "helping those who help themselves" is fully justified.

The conditions under which the Committee are prepared to consider making grants for School Camps in 1930, are as follows:—

1. That grants be paid only in respect of Camps organised from elementary schools, and of children on the rolls of such schools selected by the Head Teachers on the ground of poverty. The grant is not intended to aid camping parties conducted by voluntary organisations.
2. That the Elementary Education Sub-Committee should first approve the Camp as suitably situated. The Camp should be open to inspection and reasonably accessible for that purpose.

3. That the total grant-in-aid of all Camps falls within the limits recognised by the Board of Education for grant purposes in the particular year.
4. That grants-in-aid of School Holiday Camps of more than one week shall be considered only after "one week" Camps have been approved.
5. That no scholar under 9 *years of age* shall be permitted attend Camp.
6. That each Camp shall include at least one responsible teacher for every 30 children.

The Voluntary Work of the Sports Committees of the Teacher's Associations.

The Liverpool Branch of the National Union of Teachers controls the organisation of games, athletics and swimming competitions **out of school hours**, open to all girl scholars in the elementary schools, and the Liverpool Association of Schoolmasters controls the activities of the boys. (In addition, a parallel organisation is conducted by the Catholic Schools' Athletic Association for children attending Catholic schools.)

The annual reports by these Sports Committees tabulate a very fine record of work done by the teachers in the interests of the physical welfare of the children of the City. It is of interest to trace the growth and development of this work during the last eleven years, 1919-1929, as demonstrated by the following statistics:—

GIRLS.			SCHOOL TEAMS COMPETING.										
			1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929
ROUNDERS	...	...	13	21	59	80	75	80	76	81	83	96	97
NET-BALL	...	...	...	...	...	19	28	27	32	36	39	54	71
HOCKEY	...	...	...	...	...	...	...	...	11	9	9	9	9

	SWIMMING CERTIFICATES AWARDED.										
	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929
SWIMMING :—								*			
Breast Stroke Cert.	393	628	545	735	834	746	1160	305	1362	1653	1707
Distance Certificate	205	407	367	483	524	519	795	195	866	1233	822
Speed Certificate ...	69	99	116	175	214	164	262	62	240	338	483
Back Stroke Cert.	...	...	...	...	...	...	728	161	605	202	1443

*General Strike : Baths closed.

BOYS.	SCHOOL TEAMS COMPETING.										
	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929
FOOTBALL—											
League Comp'tions	29	69	93	97	120	113	133	138	142	140	152
Knock-Out ,, ...	18	33	38	41	47	56	55	53	48	53	54
(English Schools School boy Team Championship won, 1921)											
CRICKET—											
Group Comp'tions	56	63	71	83	87	80	101	114	119	130	132
BASEBALL—											
Group Comp'tions	17	33	43	52	45	43	42	44	46	47	49

	SWIMMING CERTIFICATES AWARDED.										
SWIMMING—	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929
Breast Stroke Cert.	1,692	2,179	1,840	1,991	1,746	1,363	1,455	} * 863	4,000	2,118	2,023
Distance Certificate	1,035	1,346	1,183	1,428	1,146	841	743			1,264	1,197
Speed Certificates	110	162	143	199	182	151	107			172	201
Back Stroke Cert.	...	...	...	...	...	...	1,396	}		discontinued	
Proficiency Cert.

*General Strike : Baths closed.

(English Schools Boys' Team Championship won by Banks Road Council School : 1919, 1921, 1922, 1924, 1925, 1926, 1927.)
(English Schools Boys' Team Championship won by Garston C.E. School : 1923.)

The Sports Committees controlling these activities of boys and girls are unanimous in stating that there has been a steady increase in the number of children participating, and a higher attainment in the standard of skill.

Extracts from the Secretaries' Reports are here appended:—

BOYS AND GIRLS.

By Mr. J. P. Callaghan (President, Liverpool and District Catholic E.S.A.A.) :—

“ It is pleasing to record that a growing interest in the Association's activities “ is shown, by the increasing number of entries for the various Competitions.

“ Out of the 50 Schools eligible to compete in the Athletic Festival, 44 actually “ participated. This means that, either directly or indirectly, some 30,000 children “ are concerned in the work of the Association.”

ANNUAL ATHLETIC FESTIVAL.

“ More than 2,500 boys and girls from 44 Schools took part in the Preliminary Heats.”

FOOTBALL.

“ The season again shows a record number of entries : 39 Schools competing “ for honours in the First, Second, and Junior Divisions of the League.

“ In the “ DAILY DISPATCH ” COMPETITION FINAL, St. Anthony's triumphed “ over St. Edward's Orphanage.

“ In the CATHOLIC SCHOOLS' CUP FINAL a very exciting match resulted in “ a victory for St. Alexander's over St. Elizabeth's Central School.

“ The LEAGUE CHAMPIONSHIPS resulted as follows :—Div. 1 : St. Alexander's ; “ Div. 2 : St. Bridget's ; Junior : St. Alexander's.”

NET BALL.

“ The game is becoming much more popular. St. Vincent's proved irresistible, “ winning both Competitions.”

CRICKET.

“ We note with pleasure an increasing interest in our national summer game. “ Three separate Leagues were required this year. St. Oswald's proved worthy “ champions.”

BASEBALL.

“ Here again greater popularity is noted. The League Championship was “ won by St. Bridget's.”

SWIMMING.

“ The entries in this Competition are still unsatisfactory. This is difficult to “ understand considering the facilities now offered at the various Baths. Mount “ Carmel proved champions in both Free Style and Breast Stroke Competitions.”

BOYS.

By Mr. G. Ashplant (Hon. Sec. Sports Committee, Liverpool Association of Schoolmasters):—

“ It is gratifying to your Sports Committee to report another highly successful year of work on behalf of the Sports and physical welfare of our schoolboys of Liverpool. Every branch of the Committee’s activities has continued to flourish, and an increase not only in the number of Schools entering but also in the number of competing teams, is shown in the several competitions.”

FOOTBALL.

“ In Football, 152 teams from 97 Schools entered the Leagues Competitions ; whilst in the “ Knock-Out ” Competition 54 teams were entered, this being an increase of one.”

“ In the English S.F.A. Shield Competition our City Team Boys defeated Bury and Barrow, but lost to Manchester in the Third Round (Preliminary). In the Lancashire County Competition the Semi-Final was reached after victories over Blackburn, Hindley, and Ashton. Two replays were necessary before the Manchester Boys passed into the Final by defeating us at Anfield. By victories over Southport, Waterloo, and Bootle, our boys became the first holders of the trophy awarded in the new Merseyside Championship Competition.”

CRICKET.

“ The ever-increasing popularity of the game of Cricket among our boys is evidenced by the fact that 80 Schools entered 132 teams in the Competitions—another record.

“ The Finals of the Competitions were played at the Police Athletic Ground and the results showed the south end of the City supreme. The Senior and Intermediate Championships were secured by Granby Street, and Parkhill C.E. gained the Junior.”

BASEBALL.

“ Forty-nine teams from thirty-one Schools took part in the Baseball Competitions, an increase of two teams on last year. Townsend Lane were successful in achieving the double event, securing both Senior and Junior Championships. A pleasing and significant feature of the season has been the success of Schools which have but recently taken up the game.”

ATHLETIC FESTIVAL.

“ As in former years the Athletic Festival held on Empire Day was a conspicuous success. This year an innovation in the shape of six District Eliminating Festivals was successfully tried. The winners of the events from each district competed at the main Festival, which was attended by many prominent local and public men. With a total of 60 points, the Sports Championship was once again won by Anfield Road.”

COUNTY FESTIVAL.

“ The Lancashire County Elementary School Sports were held in Liverpool this year, and took place at the Police Athletic Ground on June 15th. As a sporting and spectacular event it was a great success.

“ All three trophies offered in the Championship were won by the Liverpool Teams ; the boys held on to the Cup obtained last year ; the girls also won theirs, whilst the Shield for Boys and Girls' events was retained as well.”

NATIONAL SPORTS FESTIVAL.

“ Several of the Liverpool team were chosen to represent Lancashire in the English Schools Championship held at Stamford Bridge. A slight improvement was made on last year's results, several of the team winning their heats, but the only one to gain points in the final was William Cox (St. Athanasius' C.E., L'pool), who gained third place in the 220 yards.”

SWIMMING.

“ In Swimming, there was an increase in the number of Schools entered : 122 teams being entered in the “A” Division, and 17 in the “ B,” from 49 Schools. Banks Road continued their successes by gaining the Senior and Junior Free Style and the Senior Breast Stroke Competitions, whilst Beaufort Street won the Junior Breast Stroke. In the “ B ” Division, St. Mary's (Kirkdale) won both Free Style and Breast Stroke Competitions.

“ Ten District Swimming Galas were organised as in former years.

“ Held at Picton Road, the Champions' Gala maintained the high level of previous years.

“ To that very large body of teachers who give so willingly of their leisure and interest to the fostering of the true spirit of sport, our boys are chiefly indebted ; and it is with the full recognition and appreciation of the great services rendered by our colleagues in this direction that your Sports Committee submits this report.”

GIRLS.

By Miss A. M. Molloy (Hon. Secretary, Sports Committee, Liverpool Branch of the N.U.T.) :—

“ The Sports Committee has much pleasure in presenting the report for the work of the year 1929. It has been a year notable for a large increase in the numbers taking part in the normal activities of the Committee.”

NET BALL.

“ In the Senior Net Ball League Competition 37 schools entered, and 34 in the Junior League, which is becoming increasingly popular as the results are shown by the enhanced efficiency and the improved standard of play shown by the candidates for admission to the Senior Teams.

“The final game between St. Vincent’s and Sacred Heart was ultimately decided by the superior passing and accurate shooting of St. Vincent’s girls.

“The Junior finalists were St. Alexander’s R.C. and Northway Council School. St. Alexander’s won.

“The Knock-Out Competition final, on April 18th, offered the interesting attraction of another contest between Heygreen Road and St. Vincent de Paul’s. The match was won by St. Vincent’s by the narrow margin of 1 goal. St. Vincent’s have the honour of carrying off both net ball competitions in the one year.”

HOCKEY LEAGUE.

“Interest in this game is undoubtedly increasing, although we regret that the size of the league remains stationary.”

ROUNDERS.

“Facilities for this game are, in comparison, easily provided, and this may account for the very wide interest and for the very large number of schools who take part in the competitions. Each succeeding year seems to see an increase, not only in the schools which play the game, but in the numbers of schools which participate in the work of the league.”

“The District Leagues were carefully revised so that teams were able to play off their matches without any long-distance journeys, and this year the teams worked well within the time-table.

“The Dance Festival provided a very strong attraction in combination with the finals. Teams of dancers from thirty-one schools performed the usual country dances with grace and vigour, while the attractions of colour and costume were added when the National Dances were introduced by individual schools.”

ATHLETIC FESTIVAL.

“The Committee this year decided upon a somewhat bold experiment with regard to the Liverpool Festival.

“(1) To bring forward the date of the Athletic Festival from August to Empire Day, so that we should certainly anticipate the County and National Festivals and be in a position to provide adequate training for any candidates selected to participate in them.

“(2) To organise three preliminary festivals—district functions—one for schools in the North End, one for schools in the South End, and the other for the Centre of the City, in order to attract greater numbers and more representative of the different schools in the city.

“A strong team was selected from the successful candidates.”

COUNTY FESTIVAL.

“ The Liverpool Association of Schools invited Lancashire to hold its Annual Meeting in Liverpool, and arrangements were made to accept the invitation and hold the Festival at the Police Athletic Ground, on Saturday, June 15th.

“ Our girls' team did exceedingly well, and were able to secure the Girls' Trophy for Liverpool. The boys' team again carried off the trophy for the boys' events, and the aggregate of marks secured for Liverpool the County Trophy. So that this year Liverpool was awarded the whole of the trophies offered for the Festival.”

NATIONAL SPORTS FESTIVAL.

“ Held at Stamford Bridge, London, on Saturday, 20th July :

“ Liverpool and D.T.A. were offered places for four girls :—

“ Lancashire scored 2 points in the National Festival, a slight advance on last year's position.

“ The team did well, and were tremendously impressed by the performances of London, Middlesex, and Kent. They came back disappointed with their own performance, but having thoroughly enjoyed what must have been a really educational experience.”

SWIMMING.

“ Senior and Junior Breast Stroke Squadron Leagues and a Free Style Squadron League were arranged as usual, and attracted a considerable entry, 37 schools in all.”

CERTIFICATES.

“ The number of certificates awarded this year constitutes yet another record, an increase of 329 on last year's total having been achieved.

“ This year's number, 4,455 in all, is remarkable evidence of the interest and enthusiasm both of children and teachers.”

SWIMMING GALAS.

“ The Committee decided it was advisable to repeat our seven galas as last year. The entries and the attendance seem to justify the Committee's decision.”

THE COUTIE SHIELD.

“ The Swimming Certificates Competition involved keener competition than ever, 136 schools taking part, and nearly 60 schools needing to be considered in the final calculation.

“ The Coutie Shield, the trophy for this competition, is awarded this year to Banks Road Council School.”

In presenting this Report to the Elementary Education Sub-Committee, the Inspector of Physical Training wishes to emphasise the importance and extent of the willing work of the teachers of Liverpool in organising these competitions after school hours, entirely without financial aid from the Education Authority.

It is recommended that letters of appreciation be sent to the Teachers' Associations responsible.

ALFRED E. HARRIS,
Inspector of Physical Training.

March, 1930.